2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008690

Entity Name: CFA MIAMI, INC.

FILED Apr 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11401 SW 72ND PLACE PINECREST, FL 33156 **Current Mailing Address: New Mailing Address:** 11401 SW 72ND PLACE PO BOX 960901 PINECREST, FL 33156 MIAMI, FL 33296 FEI Number: 61-1572381 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDERSON, KEN 77 CRANDON BLVD. #6B US KEY BISCAYNE, FL 33149 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change (X) Addition BARBER, JOEL Name: Name: Address: Address: 11201 SW 8TH ST. UNIVERSITY PARK RB 206A City-St-Zip: City-St-Zip: MIAMI, FL 33199 Title: Title: () Change (X) Addition () Delete Name: Name: CALLAHAN, ROBERT Address: Address: 700 BRICKELL AVE City-St-Zip: City-St-Zip: MIAMI, FL 33131 Title: () Delete Title: () Change (X) Addition ANDERSON, KEN Name: Name: 77 CRANDON BLVD #6B Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33149 Title: () Delete Title: MS. () Change (X) Addition GROSSMAN, KATHRYN Name: Name: 801 BRICKELL AVE SUITE 2250 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33131 Title: () Delete Title: () Change (X) Addition TEJADA, MARCO Name: Name: 201 ALHAMBRA CIR 14TH FLOOR Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33134 Title: () Delete Title: () Change (X) Addition GARCIA-GRANADOS, SERGIO Name: Name: Address: Address: 151 SE 15TH RD APT 2303 MIAMI, FL 33129 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEN ANDERSON MR. 04/05/2009