

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09475

FILED
Mar 09, 2009
Secretary of State

Entity Name: SOCIEDAD CUBANA DE ORLANDO, INC.

Current Principal Place of Business:

5088 HOFFNER AVE
PO BOX 593281
ORLANDO, FL 328590281

New Principal Place of Business:

5088 HOFFNER AVE
ORLANDO, FL 328590281

Current Mailing Address:

5088 HOFFNER AVE
PO BOX 593281
ORLANDO, FL 328590281

New Mailing Address:

5088 HOFFNER AVE
ORLANDO, FL 328590281

FEI Number: 59-2612382

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVIO, ORTEGA
1677 BELAIR AVE
ORLANDO, FL 32812 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: ORTEGA, SILVIO
Address: 1677 BEL AIR AVE
City-St-Zip: ORLANDO, FL 32812

Title: VP () Delete
Name: SIKES, FERNANDO
Address: 3339 STONEWOOD CRT
City-St-Zip: ORLANDO, FL 32806

Title: S () Delete
Name: MELEON, BARBARA
Address: 228 E FILMORE AVE
City-St-Zip: ORLANDO, FL 32809

Title: VS () Delete
Name: CALLAO, MARTIN
Address: 5088 HOFFNER AVE
City-St-Zip: ORLANDO, FL 32859

Title: T () Delete
Name: ALEJO, JOSE
Address: 5088 HOFFNER AVE
City-St-Zip: ORLANDO, FL 32859

Title: VT () Delete
Name: BLAZQUEZ, AURELIANO
Address: 2351 MONACO COVE CIR
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: SILVIO ORTEGA

P

03/09/2009

Electronic Signature of Signing Officer or Director

Date