

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11014

FILED
Apr 21, 2008
Secretary of State

Entity Name: MUNICIPALITIES OF CUBA IN EXILE (OFFICIAL) INC.

Current Principal Place of Business:

4610 NORTHWEST 7TH STREET
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

4610 NORTHWEST 7TH STREET
MIAMI, FL 33126

New Mailing Address:

FEI Number: 59-2831032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRITO, JOSE M
4610 NW 7 STREET
MIAMI, FL 33126 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: PENARNUDA, PEDRO
Address: 2800 SW 117 CT
City-St-Zip: MIAMI, FL 33175

Title: T () Delete
Name: ECHVARRCA, MARIO
Address: 399 GOLDEN BEACH DR.
City-St-Zip: MIAMI BEACH, FL 33160

Title: S () Delete
Name: RIQUENEZ, EDDY
Address: 5910 SW 10 ST
City-St-Zip: MIAMI, FL 33144

Title: D () Delete
Name: ALZUGARAY, MANUEL
Address: 2340 CORAL WAY
City-St-Zip: MIAMI, FL 33145

Title: D () Delete
Name: PENARANDA, PEDRO
Address: 2800 SW 117 CT
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ECHEVARRIA, MARIO L
Address: 399 GOLDEN BEACH DRIVE
City-St-Zip: GOLDEN BEACH, FL 33160

Title: T (X) Change () Addition
Name: FERNANDEZ-PADRON, ROLANDO
Address: 6218 SW 8TH STREET
City-St-Zip: MIAMI, FL 33144

Title: S (X) Change () Addition
Name: BAZAIL, JUAN F
Address: 3530 MISTIC POINTE DR. #2107
City-St-Zip: AVENTURA, FL 33180

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: MARIO L. ECHEVARRIA

P

04/21/2008

Electronic Signature of Signing Officer or Director

Date