2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17286

FILED Apr 09, 2006 Secretary of State

Entity Name: NATIONAL ASSOCIATION OF PEDAGOGUES OF CUBA, INC.

Current Principal Place of Business: New Principal Place of Business:

130 SW 32ND AVE. C/O DR. ROLANDO ESPINOSA CARBALLO MIAMI, FL 331351141 US

Current Mailing Address: New Mailing Address:

130 SW 32ND AVE. C/O DR. ROLANDO ESPINOSA CARBALLO MIAMI, FL 331351141 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARBALLO, ROLANDO ESPINOSA 130 S.W. 32ND AVENUE MIAMI, FL 33135 US

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:

Flacture is Circulated at Devictor of Assert

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CARBALLO,ROLANDO ESP, INOS

Address: 130 SW 32ND AVENUE

City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: JORCANO, DEMETRIO PE, REZ

Address: 904 SW 23 AVENUE

City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: FERRER,ARMINDA MARI,

Address: 611 N W 35 AVE #1 City-St-Zip: MIAMI, FL

 Title:
 TD
 () Delete

 Name:
 GARCIA, JUANA O.LOPEZ,

 Address:
 4350 NW 8 TERRACE

City-St-Zip: MIAMI, FL

Title: PD (X) Change () Addition

Name: CARBALLO,ROLANDO ESP, INOSA

Address: 130 SW 32ND AVENUE City-St-Zip: MIAMI, FL 33135 US

Title: VD (X) Change () Addition Name: JORCANO, DEMETRIO PE, REZ

Address: 904 SW 23 AVENUE City-St-Zip: MIAMI, FL 33135 US

Title: SD (X) Change () Addition Name: ESPINOSA , ARMINDA M, ARI

Address: 130 SW 32 AVE City-St-Zip: MIAMI, FL 33135 US

Title: TD (X) Change () Addition

Name: ALCANTARA, DOMINIC, A Address: 15237 SW 46 LANE APT E City-St-Zip: MIAMI, FL 33185 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ROLANDO ESPINOSA CARBALLO PD 04/09/2006