

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 22, 2006
Secretary of State

DOCUMENT# N17286

Entity Name: NATIONAL ASSOCIATION OF PEDAGOGUES OF CUBA, INC.**Current Principal Place of Business:**130 SW 32ND AVE.
C/O DR. ROLANDO ESPINOSA CARBALLO
MIAMI, FL 331351141 US**New Principal Place of Business:**130 SW 32ND AVE.
C/O ARMINDA ESPINOSA
MIAMI, FL 331351141 US**Current Mailing Address:**130 SW 32ND AVE.
C/O DR. ROLANDO ESPINOSA CARBALLO
MIAMI, FL 331351141 US**New Mailing Address:**130 SW 32ND AVE.
C/O ARMINDA ESPINOSA
MIAMI, FL 331351141 US**FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CARBALLO, ROLANDO ESPINOSA
130 S.W. 32ND AVENUE
MIAMI, FL 33135 US**Name and Address of New Registered Agent:**ESPINOSA, ARMINDA
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: ARMINDA ESPINOSA

09/22/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CARBALLO, ROLANDO ESP, INOSA
Address: 130 SW 32ND AVENUE
City-St-Zip: MIAMI, FL 33135 US

Title: VD () Delete
Name: JORCANO, DEMETRIO PE, REZ
Address: 904 SW 23 AVENUE
City-St-Zip: MIAMI, FL 33135 US

Title: SD () Delete
Name: ESPINOSA, ARMINDA M, ARI
Address: 130 SW 32 AVE
City-St-Zip: MIAMI, FL 33135 US

Title: TD (X) Delete
Name: ALCANTARA, DOMINIC, A
Address: 15237 SW 46 LANE APT E
City-St-Zip: MIAMI, FL 33185 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALCANTARA, DOMINICA
Address: 15237 SW 46TH LN APT E
City-St-Zip: MIAMI, FL 33185 US

Title: VD (X) Change () Addition
Name: PEREZ, DEMETRIO
Address: 904 SW 23 AVENUE
City-St-Zip: MIAMI, FL 33135 US

Title: STD (X) Change () Addition
Name: ESPINOSA, ARMINDA M
Address: 130 SW 32 AVE
City-St-Zip: MIAMI, FL 33135 US

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

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: DOMINICA ALCANTARA

PD

09/22/2006

Electronic Signature of Signing Officer or Director

Date