2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 22, 2006 8:00 am DOCUMENT # N29862 **Secretary of State** 1. Entity Name 02-22-2006 90002 028 ****61.25 ASOCIACION ANTIGUOS ALUMNOS Y EMPLEADOS DEL INSTITUTO CIVICO MILITAR Y ESCUELAS Principal Place of Business Mailing Address %JUVENAL E. BLANCO %JUVENAL E. BLANCO 2616 SW 34 AVE. MIAMI FL 33133 2616 SW 34 AVE. MIAMI FL 33133 2. Principal Place of Business 3. Mailing Address uxenal Elb 26165W3AA4C Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State 4. FEI Number NO-T APPLICABLE Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BLANCO, JUVENAL E. 2616 SW 34 AVE. Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33133** Zip Code FI 8. The above named entity,s his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of reg SIGNATURE Stansture, types or printed (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Addition BLANCO, JUVENAL E NAME NAME 2616 SW 34 AVE. STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-ZIP D TITLE ☐ Delete TITLE Change Addition CASTRO, ENRIQUE NAME NAME 1815 FAIRHAVEN PL. STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition ALVAREZ, ELVIRA NAME NAME STREET ADDRESS 3250 NW 99TH ST. STREET ADDRESS CITY - ST - ZIP MIAMI FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition CHAO, MARIA NAME STREET ADDRESS 11760 SW 25 TERRA STREET ADDRESS CITY+ST-7IP MIAMI FL CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition PLUG, MARIA DEL C. NAME NAME 7060 W. 16 AVE. STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition DIZA, MANUEL NAME NAME 10341 SW 50 ST. STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-7IP CITY-ST-ZIP

FILED

SIGNATURE: Juyena 1 E. Blanco 02/06/01 305-443-050

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.