

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45110

FILED
Jul 01, 2005
Secretary of State

Entity Name: CUBAN-AMERICAN VETERANS ASSOCIATION-CAVA, INC.

Current Principal Place of Business:

P.O. BOX 140305
CORAL GABLES, FL 331140305

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 140305
CORAL GABLES, FL 331140305

New Mailing Address:

FEI Number: 65-0291702 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PENELA, FRANCISCO
7400 SW 34 ST RD.
MIAMI, FL 33155 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: PD () Delete
Name: MARTORY, JOSEPH N
Address: 3521 SW 88 CT
City-St-Zip: MIAMI, FL 33165

Title: VD () Delete
Name: GARCIA, ANDRES
Address: 4297 SW 149 CT
City-St-Zip: MIAMI, FL 33135

Title: SD () Delete
Name: CRESPO, RAFAEL
Address: 6205 SW 131CT. #263
City-St-Zip: MIAMI, FL

Title: TD () Delete
Name: PENELA, FRANCISCO
Address: 7400 SW 34 STREET ROAD
City-St-Zip: MIAMI, FL 33155

Title: D () Delete
Name: CARROCERA, JUAN
Address: 750 NW 43RD APT 104
City-St-Zip: MIAMI, FL 33126

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FRANCISCO PENELA

PRES

07/01/2005

Electronic Signature of Signing Officer or Director

_____ Date