## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # N46365** 

## **FILED** Mar 31, 2006 8:00 am Secretary of State 03-31-2006 90015 043 \*\*\*\*61.25

U.S.A., IN		SE U.S.A., INC. (C	CASA CA	NTABRIA										
6303 BLUE LAGOON DRIVE 6303 SUITE 390 SUITE			ng Address 3 BLUE LAGOON DRIVE 1E 390 MI, FL 33126-6005 US			; } <b>/18/</b> 14/ <b>8/1</b> / <b>B</b> /14		BIIDI BIIL BI		007				
2. Principal Place of Business 3. Maili			3. Mailing	ailing Address										
Suite, Apt. #, etc. St			Suite	Suite, Apt. #, etc.				03242006	Chg-NP		CR2E03	37 (11/	05)	
City & State			City (	City & State				4. FEI Number 65-0342176						olied For Applicable
Zip		Country	Zip		Cou	untry		5. Certificate	of Status Des	ired		\$8.75 Fee Re	Addi	tional
	6. Name	and Address of Current	Registered	Agent				7. Name and	Address of I	New Reg	istered /	Agent		
MADOUEZ	O MADO	ELO DODAINA DA				Name								
6303 BLUE	LAGOO	ELO ROBAINA, P.A N DRIVE	<b>.</b>				ddress (I	P.O. Box Numb	er is Not Acce	ptable)				
SUITE 390 MIAMI, FL		005							1411					
						City					FL	Zip	Code	· ····
	named entit	y submits this statement for tered agent.	or the purpos	e of changing its	register	red office or	register	ed agent, or bo	th, in the State	of Flori	da. I am	familiar	with, a	and accept
	_	-												
SIGNATURE _	Signature, typed	or printed name of registered agent	t and title if applic	able. (NOT	E: Registere	ed Agent signatu	re required	when reinstating)			DATE			
Filing Fee is \$61.25  Due by May 1, 2006  9. Election Campaign Trust Fund Contribu														
	-	r				-		\$5.00 May 8 Added to Fees	Зе		ke checi la Depar			
	-	r	IRECTORS			tion.		\$5.00 May 6 Added to Fees	i	Florid	a Depar	tment	of Sta	ate
	PD HERRAN 8460 SW	MAY 1, 2006  OFFICERS AND DI  , MANUEL A  5TH STREET	IRECTORS		11. TITL NAM STR	tion.		Added to Fees	i	Florid	a Depar	tment	of Sta	ate
10. TITLE NAME STREET ADDRESS	PD HERRAN 8460 SW MIAMI, FI VD CUADRA 3315 DUI	MAY 1, 2006  OFFICERS AND DI  , MANUEL A  5TH STREET	IRECTORS	Trust Fund (	11. TITE NAM STR CUTY TITE NAM STR STR STR	tion.  LE  ME  SEET ADDRESS Y-ST-ZIP		Added to Fees	i	Florid	a Depar	tment RECTO	of Sta RS IN lange	10
10.  IIILE , NAME STREET ADDRESS . CITY-ST-ZIP  FIJLE NAME STREET ADDRESS	PD HERRAN 8460 SW MIAMI, FI VD CUADRA 3315 DUI CORAL C SD COSSIO,	MAY 1, 2006  OFFICERS AND DI  , MANUEL A 5TH STREET L 33144  DO, ALFREDO RANGO STREET GABLES, FL 33134  VINCENT 16 STREET	IRECTORS	Trust Fund (	11. TITL NAM STR CITL NAM STR CITL NAM STR CITL NAM STR	LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP		Added to Fees	i	Florid	a Depar	RECTO	of Sta RS IN lange	10 Addition
10.  IIILE NAME STREET ADDRESS CITY-ST-ZIP  IIILE NAME STREET ADDRESS CITY-ST-ZIP  IIILE NAME STREET ADDRESS STREET ADDRESS	PD HERRAN 8460 SW MIAMI, FI VD CUADRA 3315 DUI CORAL C SD COSSIO, 5876 SW MIAMI, F D2VP SUAREZ 6303 BLU	MAY 1, 2006  OFFICERS AND DI  , MANUEL A 5TH STREET L 33144  DO, ALFREDO RANGO STREET GABLES, FL 33134  VINCENT 16 STREET L		Trust Fund (	11. TITLE NAME STREET COMMENTS THE COMMENTS	LEE ME LEET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	D2VI SUAI 6356	Added to Fees	IANO	FICER	a Depar	RECTO CO	of Ste RS IN nange nange	Addition  Addition  Addition
10.  IIILE NAME STREET ADDRESS CITY-SI-ZIP  IIILE NAME STREET ADDRESS STREET ADDRESS	PD HERRAN 8460 SW MIAMI, FI VD CUADRA 3315 DUI CORAL C SD COSSIO, 5876 SW MIAMI, F D2VP SUAREZ 6303 BLU MIAMI, F TD GOMEZ- 1301 VAI	MAY 1, 2006  OFFICERS AND DI  , MANUEL A 5TH STREET L 33144  DO, ALFREDO RANGO STREET GABLES, FL 33134  VINCENT 16 STREET L  L  L  L  L  L  L  L  L  L  L  L  L		Trust Fund (	11. TITLE NAME STREET S	LE ME REET ADDRESS Y-ST-ZIP	D2VI SUAI 6356	Added to Fees ADDITIONS/CH REZ, LUC S SW 10t	IANO	FICER	a Depar	tment RECTC	of Str IRS IN nange nange nange	10 Addition Addition

I nereby certify that the information supplied with this lang does not quality for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the received 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 empoweres.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/23/06 (305) 634-8669

Daytime Phone #

## 2006 NOT-FOR-PROFIT CORPORATION ATTACHMENT ANNUAL REPORT (CONTINUATION)

SIGNATURE:

SIGNATURE AND TYPED OR BRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **DOCUMENT # N46365** ATTACHMENT CANTABRIA HOUSE U.S.A., INC. (CASA CANTABRIA U.S.A., INC.) Principal Place of Business Mailing Address 6303 BLUE LAGOON DRIVE 6303 BLUE LAGOON DRIVE 50007508 **SUITE 390** SUITE 390 MIAMI, FL 33126-6005 US MIAMI, FL 33126-6005 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03242006 Chg-NP CR2E037 (11/05) City & State Applied For City & State 4. FEI Numb 65-0342176 Not Applicable Zip Country Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARQUEZ & MARCELO ROBAINA, P.A. Street Address (P.O. Box Number is Not Acceptable) 6303 BLUE LAGOON DRIVE **SUITE 390** MIAMI, FL 33126-6005 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make check payable to Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Florida Department of State Trust Fund Contribution. Added to Fees Due by May 1, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Change XX Addition ATD TITLE TITEE Defete ATD TRUEBA DE MESTRE, CARMINA TRUEBA DE MESTRE, CARMINA NAME NAME STREET ADDRESS STREET ADDRESS 2250 SW 131 Place 2250 SW 131 Place CITY-ST-ZIP CITY-ST-7IP MIAMI, FL 33175 MIAMI, FL 33175 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP \_\_\_ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP \_\_\_ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change TITLE ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the recenter 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 of the corporation of the recenter of the recenter of the corporation of the recenter of the recenter of the corporation of the recenter (305)03/23/06 634-8669