## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N92000000384

FILED Apr 29, 2005 Secretary of State

Entity Name: PUENTE DE JOVENES PROFESIONALES CUBANOS, INC.

Current Principal Place of Business:			New Prin	New Principal Place of Business:		
1528 PALERMO AVENUE CORAL GABLES, FL 33134 US			2665 S BA SUITE 70 MIAMI, FL			
Current Mailing Address:			New Mai	New Mailing Address:		
1528 PALERMO AVENUE CORAL GABLES, FL 33134			SUITE 70	2665 S BAYSHORE DR SUITE 701 MIAMI, FL 33133		
FEI Number:	69-0043070	FEI Number Applied For ( )	FEI Number Not Ap	olicable ( ) Certi	ficate of Status Desired ( )	
Name and	Address of Cu	urrent Registered Agent:	Name an	d Address of New R	legistered Agent:	
1528 PALE	EZ, JR., NICOLA RMO AVENUE ABLES, FL 3313		2665 S B/ SUITE 70	GUTIERREZ, JR., NICOLAS J ESQ. 2665 S BAYSHORE DR SUITE 701 MIAMI, FL 33133 US		
	named entity รเ e of Florida.	ubmits this statement for th	ne purpose of changing	its registered office of	or registered agent, or both,	
SIGNATUF	RE:				04/29/2005	
	Electronic	c Signature of Registered	Agent		Date	
OFFICERS	AND DIRECT	ORS:	ADDITIO	NS/CHANGES TO C	FFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DVP () E BEGUIRISTIAN, E 9127 N.W. 176TH MIAMI, FL 33018	H LANE	Title: Name: Address: City-St-Zip:	()Chang	ge ( ) Addition	
Title: Name: Address: City-St-Zip:	` '		Title: Name: Address: City-St-Zip:	DP (X) Chang GUTIERREZ, JR., NIC 2665 S BAYSHORE D MIAMI, FL 33133 US		
Title: Name: Address: City-St-Zip:	D () E RODRIGUEZ, ER 401 OCEAN DRIV MIAMI BEACH, FI	VE, APT. 824	Title: Name: Address: City-St-Zip:	()Chang	ge ( ) Addition	
Title: Name: Address: City-St-Zip:	DS () E BELLO, RAMON 845 EAST 5TH S HIALEAH, FL 330	TREET	Title: Name: Address: City-St-Zip:	()Chang	ge ( ) Addition	
Title: Name: Address:	BELL, HENRY	Delete SLER STREET, SUITE 170	Title: Name: Address:	D (X) Chang BELL, HENRY 6333 SUNSET DRIVE	ge ( ) Addition	

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: NICOLAS J. GUTIERREZ, JR., ESQ. DP 04/29/2005