2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2005
Secretary of State

DOCUMENT# N93000004646

Entity Name: CUBAN-AMERICAN ENDOWMENT FOR THE ARTS, INC.

Current Principal Place of Business:

44 NW 85 COURT
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

44 NW 85 COURT
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 65-0476263 **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:

CALLAVA, TERESA
44 NW 85 COURT
MIAMI, FL 33126 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: CALLAVA, TERESA
Address: 44 NW 85 CT
City-St-Zip: MIAMI, FL 33126

Title: SD ( ) Delete
Name: MARTINEZ-FRAGA, PEDRO
Address: 7300 SW 123 TERRACE
City-St-Zip: MIAMI, FL 33156

Title: TD ( ) Delete
Name: SANCHEZ, JUAN T
Address: 6932 SUNRISE PLACE
City-St-Zip: MIAMI, FL 33133

Title: VP (X) Delete
Name: AMIGUET, MARIO
Address: 4606 UNIVERSITY DRIVE
City-St-Zip: CORAL GABLES, FL 33134

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:

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: TERESA CALLAVA PD 07/08/2005
Electronic Signature of Signing Officer or Director Date