

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000384

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: ASAMBLEA PROVINCIAL DE CAMAGUEY EN EL EXILIO, INC.

## Current Principal Place of Business:

851 NW 14TH CT.  
MIAMI, FL 331253621

## New Principal Place of Business:

851 NW 14TH COURT  
MIAMI, FL 33125

## Current Mailing Address:

851 NW 14TH CT.  
MIAMI, FL 331253621

## New Mailing Address:

851 NW 14TH COURT  
MIAMI, FL 33125

FEI Number: 65-0553819

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VIAMONTES, CIRO L  
851 NW 14TH CT.  
MIAMI, FL 331253621 US

## Name and Address of New Registered Agent:

VIAMONTES, CIRO L  
851 NW 14TH COURT  
MIAMI, FL 33125 US

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:

04/29/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: VIAMONTES, CIRO L  
Address: 851 NW 14 COURT  
City-St-Zip: MIAMI, FL 33125

Title: PD ( ) Delete  
Name: SOSA, ROBERTO  
Address: 671 E 53 ST.  
City-St-Zip: HIALEAH, FL 33013

Title: DS ( ) Delete  
Name: VIAMONTES, GEORGINA C  
Address: 851 NW 14 CT  
City-St-Zip: MIAMI, FL 33125

Title: DP ( ) Delete  
Name: AUED, RAUL  
Address: 1075 SW 45 AVENUE  
City-St-Zip: MIAMI, FL 33134

Title: DV ( ) Delete  
Name: COSIO, DARIO  
Address: 4051 SW 112 AVE  
City-St-Zip: MIAMI, FL 33134

Title: DT ( ) Delete  
Name: SANCHEZ, RICARDO  
Address: 41 NW 59 CT  
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:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CIRO L VIAMONTES

DP

04/29/2009

Electronic Signature of Signing Officer or Director

Date