

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002553

FILED
May 01, 2007
Secretary of State

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

Current Principal Place of Business:

4610 NW 7TH STREET
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

4610 NW 7TH STREET
MIAMI, FL 33126

New Mailing Address:

FEI Number: 65-0682698 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:

FERNANDEZ, ALFREDO
4610 NW 74 ST.
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: DP () Delete
Name: PENARANDA, PEDRO M
Address: 2800 SW 117 CT
City-St-Zip: MIAMI, FL 33175

Title: DV () Delete
Name: MARTIN, CATALINA
Address: 925 NW 7YH ST RD
City-St-Zip: MIAMI, FL 33136

Title: DS () Delete
Name: RIQUENES, EDDY
Address: 5910 SW 10 ST.
City-St-Zip: MIAMI, FL 33144

Title: DS () Delete
Name: RODRIGUEZ, LUIS
Address: 2624 NE 24TH COURT
City-St-Zip: MIAMI, FL 33142

Title: DT () Delete
Name: LECUSAY, JOSE H
Address: 15611 SW 48 ST.
City-St-Zip: MIAMI, FL 33185

Title: DVT () Delete
Name: PEFRO, VIVES
Address: 6880 SW 48 TERR.
City-St-Zip: MIAMI, FL 33155

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: JUANRODRIGUEZ

_____ Electronic Signature of Signing Officer or Director

OD

05/01/2007

_____ Date