


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 16, 2008 8:00 am**  
**Secretary of State**

07-16-2008 90009 025 \*\*\*\*61.25

<b>DOCUMENT # N97000000120</b> 1. Entity Name <b>INSTITUTO DE ESTUDIOS CUBANOS, INC.</b>					
Principal Place of Business <b>1545 BLUE ROAD</b> <b>CORAL GABLES, FL 33146 US</b>			Mailing Address <b>1545 BLUE ROAD</b> <b>CORAL GABLES, FL 33146 US</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.			3. Mailing Address  Suite, Apt. #, etc.		
City & State  Zip Country			City & State  Zip Country		
4. FEI Number <b>23-7372945</b>			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			<b>\$8.75</b> Additional Fee Required		
<b>6. Name and Address of Current Registered Agent</b> <b>HERRERA, MARIA CRISTINA DR</b> <b>1545 BLUE ROAD</b> <b>CORAL GABLES, FL 33146</b>			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 <u>MARIA CRISTINA HERRERA</u> <i>MC Herrera</i> <span style="float: right;">7/11/2008</span> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>VALDES, DAGOBERTO</b> <b>1545 BLUE ROAD</b> <b>CORAL GABLES, FL 33146</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <b>BLANCO, JUAN A</b> <b>35 B FORESTER CR</b> <b>ONTARIO, CANADA, K2H8Y3</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <b>GONZALEZ, GERDO</b> <b>JARDINES S IGNACIO, APT 1301 B</b> <b>SAN JUAN, PR 00927</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V GONZALEZ, GERARDO</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Jardines S. Ignacio APT 1301 B</b> <b>SAN JUAN, PR. 00927</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <b>VICIEDO, OSCAR</b> <b>2125 W 52 ST #105</b> <b>HIALEAH, FL 33016</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S VICIEDO, OSCAR</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>2125 W 52 ST #105</b> <b>Hialeah, FL 33016.</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <b>SOTLIYO, CARLOS</b> <b>8927 NW 111 TERRACE</b> <b>HIALEAH, FL 33018</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T SOTUYO, Carlos</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>8927 NW 111 TERRACE</b> <b>Hialeah, FL 33018</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 receiver 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 empowered.					
SIGNATURE: <u>OSCAR VICIEDO</u> <i>OV</i> <span style="float: right;">7/4/2008</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					