2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006852

FILED Feb 02, 2009 Secretary of State

Entity Name: THE ASSOCIATION OF CUBAN ENGINEERS SCHOLARSHIP FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 557575 3301 MONEGRO ST MIAMI, FL 332557575 CORAL GABLES, FL 33134 **Current Mailing Address: New Mailing Address:** P.O. BOX 557575 MIAMI, FL 332557575 FEI Number: 65-0974344 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SANCHEZ, GONZALO 3301 MONÉGRO ST. CORAL GABLES, FL 33134 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition FERNANDEZ, GERARDO FERRER, RAMON Name: Name: 7300 SW 84 PL Address: 13930 SW 38TH TERR Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: MIAMI, FL 33175 Title: Title: () Delete () Change () Addition MONTADAS, PETER Name: Name: Address: 81 SHORE DRIVE WEST Address: City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: Title: () Delete Title: (X) Change () Addition ACOSTA, MICHAEL Name: SANCHEZ, RODOLFO Name: 11888 S.W. 72 TERRACE Address: Address: 8100 SW 89TH TERR City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33156 Title: () Delete Title: () Change () Addition FIGUEREDO, LUIS Name: Name: Address: 13111 SW 5TH ST. Address: City-St-Zip: MIAMI, FL 33184 City-St-Zip: Title: () Delete Title: () Change () Addition SANCHEZ, GONZALO Name: Name: 3301 MONEGRO ST. Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: () Delete Title: () Change () Addition SANCHEZ, ROBERT Name: Name: Address: 911 SISTINA AVENUE Address: CORAL GABLES, FL 33146 City-St-Zip: 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: GONZALO SANCHEZ T 02/02/2009