

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004881

FILED
Jan 21, 2009
Secretary of State

Entity Name: GRUPO INTERNACIONAL PARA LA RESPONSABILIDAD SOCIAL CORPORATIVA EN CUBA, INC.

Current Principal Place of Business:

8500 SW 8 STREET
SUITE 266
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

8500 SW 8 STREET
SUITE 266
MIAMI, FL 33144

New Mailing Address:

FEI Number: 65-1251169 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS RD. #221E
PALM BEACH GARDENS, FL 33410 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: D () Delete
Name: BRITO, JOEL
Address: 8500 SW 8 STREET SUITE 266
City-St-Zip: MIAMI, FL 33144

Title: D () Delete
Name: QUINTELA, NIVIA
Address: 8500 SW 8 STREET SUITE 266
City-St-Zip: MIAMI, FL 33144

Title: V () Delete
Name: CABRERA, ANIBAL
Address: 8500 SW 8 STREET SUITE 266
City-St-Zip: MIAMI, FL 33144

Title: D () Delete
Name: OSORIA, ANDRES
Address: 8500 SW 8 STREET, SUITE 266
City-St-Zip: MIAMI, FL 33144

Title: PD () Delete
Name: COLLADO, JOSE
Address: 8500 SW 8 STREET, SUITE 266
City-St-Zip: MIAMI, FL 33144

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:

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: JOSE J. COLLADO

PRES

01/21/2009

Electronic Signature of Signing Officer or Director

_____ Date