2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004918

Entity Name: THE CUBAN AMERICAN CPA ASSOCIATION FOUNDATION,

INC.

Current Principal Place of Business:

999 PONCE DE LEON BLVD

SUITE 1045

CORAL GABLES, FL 33134

Current Mailing Address:

999 PONCE DE LEON BLVD **SUITE 1045**

CORAL GABLES, FL 33134 US

FEI Number: 20-0694721 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

PEREZ, GRETEL VIZCAINO ZOMERFELD,LLP 999 PONCE DE LEON BLVD 1045 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: GRETEL PEREZ 04/30/2018

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

3000

City-State-Zip:

Title SECRETARY Title **TREASURER**

Name MESA, JORGE Name BUSTAMENTE, MONIQUE

Address 999 PONCE DE LEON BLVD Address 255 ALHAMBRA CIR 1045

5650

CORAL GABLES FL 33134 City-State-Zip: MIAMI FL 33134 City-State-Zip:

Title **PRESIDENT** Title DIRECTOR

PEREZ, GRETEL LOPEZ, MARCO Name Name

2121 PONCE DE LEON BLVD 999 PONCE DE LEON Address Address

SUITE 650 **SUITE 1045**

City-State-Zip: MIAMI FL 33134 City-State-Zip: MIAMI FL 33134

Title **DIRECTOR** Title PRESIDENT ELECT Name LLERENA, ENRIQUE Name GONZALEZ, LEO

4649 PONCE DE LEON BOULEVARD Address 1395 BRICKELL AVE, SUITE 1150 Address

> City-State-Zip: MIAMI FL 33131

City-State-Zip: MIAMI FL 33146

Title **EX-OFFICIO** Title ASST. SECRETARY

RODRIGUEZ, JOEL Name

Address 999 PONCE DE LEON BLVD 201 S. BISCAYNE BOULEVARD Address

SUITE 1045

City-State-Zip: MIAMI FL 33134 MIAMI FL 33131

I hereby 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 all other like empowered.

Name

ALVAREZ, ILEANA

04/30/2018 PRESIDENT SIGNATURE: GRETEL PEREZ

FILED Apr 30, 2018

Secretary of State

CC2866028858