### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004918

INC.

Entity Name: THE CUBAN AMERICAN CPA ASSOCIATION FOUNDATION,

## **Current Principal Place of Business:**

2655 LE JEUNE RD. SUITE 805-6

CORAL GABLES, FL 33134

### **Current Mailing Address:**

2655 LE JEUNE RD. SUITE 805-6 CORAL GABLES, FL 33134 US

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

### Name and Address of Current Registered Agent:

FIERMAN, ANDREW 4649 PONCE DE LEON BOULEVARD SUITE 404 CORAL GABLES, FL 33146 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: ANDREW FIERMAN 03/02/2016

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **EX OFFICIO** Title SECRETARY MESA, JORGE Name MARTIN, BEATRIZ Name

999 PONCE DE LEON BLVD Address Address 999 PONCE DE LEON BLVD

> 1045 1045

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

Title **PRESIDENT** Title TREASURER Name FIERMAN, ANDREW Name PEREZ. GRETEL

Address 4649 PONCE DE LEON BOULEVARD Address 2121 PONCE DE LEON BLVD

SUITE 650 SUITF 404

CORAL GABLES FL 33146 MIAMI FL 33134 City-State-Zip: City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name LOPEZ, MARCO Name GUERRA-AGUIRRE, MIRTHA

Address 999 PONCE DE LEON Address 999 PONCE DE LEON

**SUITE 1045 SUITE 1030** 

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

Title ASST. TREASURER Title ASST. SECRETARY Name GONZALEZ, LEO Name ACOSTA, YESENIA

Address 1395 BRICKELL AVE. SUITE 1150 Address 801 BRICKELL AVE #1050

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

#### Continues on page 2

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.

SIGNATURE: ANDREW FIERMAN **PRESIDENT** 03/02/2016

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Mar 02, 2016

Secretary of State

CC6790249708

# Officer/Director Detail Continued:

Title VP

Name ALVAREZ, ILEANA

Address 999 PONCE DE LEON BLVD

SUITE 1045

City-State-Zip: MIAMI FL 33134

Title PRESIDENT ELECT

Name HERNANDEZ, DAVID

Address 8200 NW 41ST ST #200

City-State-Zip: DORAL FL 33166