

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44975

FILED  
Apr 29, 2004  
Secretary of State

**Entity Name:** HISPANIC BAR ASSOCIATION OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

300 E. ROBINSON STREET  
STE. 600  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3000  
STE. 600  
ORLANDO, FL 32802

**New Mailing Address:**

**FEI Number:** 59-3086401

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COLOMBO, CARLOS M  
315 EAST ROBINSON STREET  
ORLANDO, FL 32801 US

**Name and Address of New Registered Agent:**

DIAZ, ARISTIDES J  
425 WEST COLONIAL DRIVE  
206  
ORLANDO, FL 32804 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: ARISTIDES J. DIAZ

04/29/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: COLOMBO, CARLOS M  
Address: 315 E. ROBINSON STREET., STE. 600  
City-St-Zip: ORLANDO, FL 32801

Title: TD ( ) Delete  
Name: CARO, SHIRLEY  
Address: 609 ENGEL DRIVE  
City-St-Zip: ORLANDO, FL 32807

Title: SD ( ) Delete  
Name: POWER, ROBERT  
Address: 111 N. ORANGE AVENUE., STE. 2000  
City-St-Zip: ORLANDO, FL 32801

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: KATZ, NORBERTO  
Address: 425 NORTH ORANGE AVENUE, STE. 540  
City-St-Zip: ORLANDO, FL 32801

Title: TD (X) Change ( ) Addition  
Name: DIAZ, ARISTIDES  
Address: 425 WEST COLONIAL DRIVE, STE. 206  
City-St-Zip: ORLANDO, FL 32804

Title: SD (X) Change ( ) Addition  
Name: TELLECHEA, ALBERT  
Address: 255 S. ORANGE AVENUE, 17TH FLOOR  
City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ARISTIDES J. DIAZ

TD

04/29/2004

Electronic Signature of Signing Officer or Director

Date