

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2002 8:00 am
Secretary of State

03-11-2002 90065 013 ****61.25

DOCUMENT # N46225

1. Entity Name
TAMPA SISTER CITIES COMMITTEE, INC.

Principal Place of Business Mailing Address
 P.O. BOX 4040 P.O. BOX 5038
 TAMPA FL 33677 TAMPA FL 33675
 US

2. Principal Place of Business 3. Mailing Address
P.O. BOX 5038

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
TAMPA, FL

Zip Country Zip Country
33675 **HILLS**

4. FEI Number Applied For
59-3115512 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
ALVAREZ, M.G. JR.
4144 N. ARMENIA AVENUE
TAMPA FL 33607

7. Name and Address of New Registered Agent
 Name **HENRY J. FERNANDEZ**
 Street Address (P.O. Box Number is Not Acceptable)
3944 DORAL DR.
 City **TAMPA** FL Zip Code **33634**

8. 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 *[Signature]* DATE **2/20/02**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DE VIVERO, JOSE 12233 N FLORIDA AVE TAMPA FL 33612 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HENRY J. FERNANDEZ 3944 DORAL DR. TAMPA, FL 33634 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARRINO, DONNA 13532 LAKE MAGDALENE DR TAMPA FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JOHN P. SPOTO 1026 MEADOW LANE BRANDON, FL. 33511 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SIEWART, REGINA 51 LAGUNA AVENUE TAMPA FL 33-6060 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RENE HUESCA 3212 ARCH ST. TAMPA, FL. 33607 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PINES, HAZEL 3308 UNION STREET TAMPA FL 33607 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RAUL C. PALOMINO JR. 5814 IDLE FOREST PL TAMPA, FL. 33614 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ALVAREZ, MANNY JR 4603 WISHART BLVD TAMPA FL 33603 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAZEL PINES 3308 UNION STREET, TAMPA, FL. 33607 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SBM TURNER, JAMES R 3405 MULLEN AVENUE TAMPA FL 33609 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOSEPH PANDO 3221 B EMPERADO ST. TAMPA, FL. 33629 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **RENE HUESCA** **FEB. 20, 02** **813 977 4449**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)

ATTACH DOC# NY6225

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VINCENT PARDO

ADDITION

16901 CEDAR BLUFF DR.

TAMPA, FLA. 33618

D

ADDITION

JEFF CORYDON III

1007 BALLINGER RD.

LUTZ, FL. 33549

D.

ADDITION

DR. PETER DAWSON

822 S. ROME

TAMPA, FL. 33606

D.

ADDITION

MARIO GARCIA

2401 BAYSHORE BLVD. APT. 203

TAMPA, FL. 33629

D.

ADDITION

JISLENO RODRIGUEZ

3301 BAYSHORE BLVD. UNIT 1505C

TAMPA, FL. 33629

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ADDITION

DR. MAX PENA

4204 CARROLLWOOD VILLAGE CT.

TAMPA, FL. 33624

D.

ADDITION

ROSE-MARIE MAGRIBY

928 S. DAKOTA AVE.

TAMPA, FL. 33604

D

ADDITION

JOSE R. CALDEVILLA

4609 EDDY DR.

TAMPA, FL. 33603