

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 02, 2003 8:00 am
Secretary of State

09-02-2003 90196 015 ****61.25

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1. Entity Name
HISPANIC AMERICAN FIREFIGHTERS ASSOCIATION, INC.



Principal Place of Business

2250 SW 3 AVE.
MIAMI FL 33129
US

Mailing Address

2250 SW 3 AVENUE
THIRD FLOOR
MIAMI FL 33129
US

2. Principal Place of Business

80 SW 8 ST

3. Mailing Address

80 SW 8 ST

Suite, Apt. #, etc.

900

Suite, Apt. #, etc.

1900

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number **65-0532141**

Applied For

Not Applicable

Zip **33130**

Country

USA

Zip **33130**

Country

DATE/USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

ROJAS, ROBERTO
2250 S.W. 3RD AVE.
THIRD FLOOR
MIAMI FL 33129

7. Name and Address of New Registered Agent

Name **SAME**
Street Address (P.O. Box Number is not Acceptable)
80 SW 8 ST
City **MIAMI** FL Zip Code **33130**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8.8.03

FILE NOW: FEE IS \$61.25

After September 10, 2003, min will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	ROJAS, ROBERTO	
STREET ADDRESS	2250 SW 3 AVE.	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	D	<input type="checkbox"/> Delete
NAME	CHAPELIN, JERRY	
STREET ADDRESS	2250 SW 3 AVE.	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	D	<input type="checkbox"/> Delete
NAME	RAMOS, SERGIO	
STREET ADDRESS	2250 SW 3 AVE.	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ULLOA, GEO	
STREET ADDRESS	2250 SW 3 AVE.	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	NOCHEA, JOSE	
STREET ADDRESS	2250 SW 3 AVE.	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BALLESTER, EDDY	
STREET ADDRESS	2250 SW 3 AVE.	
CITY-ST-ZIP	MIAMI FL 33129	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERT ROJAS	
STREET ADDRESS	80 SW 8 ST #1900	
CITY-ST-ZIP	MIAMI FL 33130	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JERRY CHAPELIN	
STREET ADDRESS	80 SW 8 ST #1900	
CITY-ST-ZIP	MIAMI FL 33130	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SERGIO RAMOS	
STREET ADDRESS	80 SW 8 ST #1900	
CITY-ST-ZIP	MIAMI FL 33130	
TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GABENEMETH	
STREET ADDRESS	80 SW 8 ST #1900	
CITY-ST-ZIP	MIAMI FL 33130	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 REQUIRED ROBERT ROJAS 8.8.03 305 856 6868**

CR2E037 (4/03)