

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

FILED
Jul 18, 2003 8:00 am
Secretary of State

01-09-2003 90096 017 ****61.25
07-18-2003 90082 031 ****61.25

DOCUMENT # N96000006445

1. Entity Name
NATIONAL HISPANIC STUDENT FOUNDATION, INC.



Principal Place of Business

1205 LINCOLN RD
211
MIAMI BEACH FL 33139
US

Mailing Address

2457 COLLINS AVE #701
MIAMI BEACH FL 33140

2. Principal Place of Business

301 Arthur Godfrey Rd.
3rd floor

3. Mailing Address

Suite, Apt. #, etc.

City & State

Miami Beach, FL

City & State

4. FEI Number **65-0723658**

Applied For
Not Applicable

Zip
33140

Country
USA

Zip

Country

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

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

LOPEZ, LILIAM M
2457 COLLINS AVENUE #701
MIAMI BEACH FL 33140

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	LOPEZ, LILIAM M	2457 COLLINS AVE 701	MIAMI BCH FL	<input type="checkbox"/>
C	MARTINEZ, LAZARO	1111 LINCOLN RD STE 810	MIAMI BCH FL	<input type="checkbox"/>
S	FLORES, ANA M MONTE	172-A WEST FLAGLER ST	MIAMI FL 33130	<input type="checkbox"/>
T	BUSTAMANTE, RODOLFO	2125 BISCAYNE BLVD #361-A	MIAMI FL 33137	<input type="checkbox"/>
D	GONZALEZ, NERY	220 ALHAMBRA CIRCLE	CORAL GABLES FL 33134	<input type="checkbox"/>
D	BUSTAMANTE, REDOLFO	1750 JAMES AVE # 4C	MIAMI FL 33139	<input checked="" type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		1680 Michigan Ave	Miami Beach, FL 33139	<input checked="" type="checkbox"/>
		901 Ponce de Leon Blvd #900	Coral Gables, FL 33134	<input checked="" type="checkbox"/>
		3500 N.W. 51st	Miami, FL 33142	<input checked="" type="checkbox"/>
		Jesus Velazquez	1680 Michigan Ave	<input checked="" type="checkbox"/>
			Miami Beach, FL 33139	<input checked="" type="checkbox"/>

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

Liliana M. Lopez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/15/03 305-534-1903

CR2E037 (4/03)