

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000148925

FILED
Apr 24, 2008
Secretary of State

Entity Name: HISPANIC MARKETPLACE ORGANIZATION, INC.

Current Principal Place of Business:

138 SEABREEZE CIRCLE
KISSIMMEE, FL 34743

New Principal Place of Business:

Current Mailing Address:

138 SEABREEZE CIRCLE
KISSIMMEE, FL 34743

New Mailing Address:

P.O.BOX 621717
ORLANDO, FL 32862

FEI Number: 20-3765573

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUIZ, THOMAS E
138 SEABREEZE CIRCLE
KISSIMMEE, FL 34743 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: RUIZ, THOMAS E
Address: 138 SEABREEZE CIRCLE
City-St-Zip: KISSIMMEE, FL 34743

Title: VS () Delete
Name: RUIZ, LIDICE
Address: 138 SEABREEZE CIRCLE
City-St-Zip: KISSIMMEE, FL 34743

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS E RUIZ

PT

04/24/2008

Electronic Signature of Signing Officer or Director

Date