2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004493

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FILED Jun 21, 2004 Secretary of State

Entity Name: THE UNITED HISPANIC FOUNDATION/HISPANOS UNIDOS, INC.

Current Principal Place of Business: New Principal Place of Business: 2133 N.W. 17TH AVE MIAMI, FL 33142 **Current Mailing Address: New Mailing Address:** 2133 N.W. 17TH AVE MIAMI, FL 33142 FEI Number: 71-0948964 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VARGAS, JUANA A VARGAS, JUANA A 1364 SW 181 AVE 610 SW 21 ROAD PEMBROKE PINES, FL 33029 US MIAMI, FL 33129 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: JUANA A VARGAS 06/21/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ORTEGA, RAMON Name: Name: 80 S SHORE DRIVE Address: Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: Title: Title: () Delete () Change () Addition Name: GONZALEZ, VIRGINIA Name: Address: 1364 S.W. 181 AVE Address: City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: Title: () Delete Title: () Change () Addition ORTEGA, ZUNILDA Name: Name: 80 S.SHORE DRIVE Address: Address: City-St-Zip: MIAMI BEACH, FL 33041 City-St-Zip: (X) Change () Addition Title: D () Delete Title: Name: GARCIA, MILAGROS Name: ROJAS, JULIAN 610 SW 21 ROAD Address: 80 S.SHORE DRIVE Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIAMI, FL 33129 Title: () Delete Title: () Change (X) Addition VARGAS, JUANA A Name: Name: 610 SW 21 ROAD Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33129 Title: () Delete Title: () Change (X) Addition SURIEL, FELIX J Name: Name: Address: Address: 10090 NW 80 CT APT13333 HIALEAH GARDENS, FL 33016 City-St-Zip: City-St-Zip:

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: JULIAN ROJAS D 06/21/2004