2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005 8:00 am
Secretary of State
04-21-2005 90229 040 ****61.25

DOCUMENT # N01000002126

1. Entity Name
MEXICAN COUNCIL OF TAMPA BAY, INC.

Principal Place of Business	Mailing Address
612 FRANKLIN ST CLEARWATER, FL 33756-5414	612 FRANKLIN ST CLEARWATER, FL 33756-5414

02222005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3710013 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GOMEZ, ROBIN I
1316 WHISPERING PINES DR
CLEARWATER, FL 33764-2822

7. Name and Address of New Registered Agent

Name: Brenda Alvarado
Street Address (P.O. Box Number is Not Acceptable): 612 Franklin St
City: Clearwater **FL** Zip Code: 33756-5414

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: Brenda 4/18/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PEREZ, MARGARITO 612 FRANKLIN ST CLEARWATER, FL 33756	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MEZQUITE, ODILON 612 Franklin St CLEARWATER FL 33756	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MEZQUITE, ODILON 612 FRANKLIN ST CLEARWATER, FL 33756	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP TEPETATE, RUBEN 612 Franklin St Clearwate. FL 33756.	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GONZALEZ, SEVERIANO 612 FRANKLIN ST CLEARWATER, FL 33756	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GARCIA, GORGONIO 612 FRANKLIN ST CLEARWATER FL 33756	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MENDOZA, FELIX 612 FRANKLIN ST CLEARWATER FL 33756	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: Brenda 3-705
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #