

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

FILED
May 19, 2003 8:00 am
Secretary of State

04-28-2003 91301 004 ****61.25

DOCUMENT # N02000004567

1. Entity Name

**COALITION OF GUATEMALAN IMMIGRANTS, INC. - CONGU
ATE -**



Principal Place of Business
**8500 W FLAGLER ST #108-A
MIAMI FL 33144**

Mailing Address
**8500 W FLAGLER ST #108-A
MIAMI FL 33144**

55041571

2. Principal Place of Business

SAME AS ABOVE

3. Mailing Address

SAME AS ABOVE



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

35-2187279

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VILLELA, D.D.S.M.S., BERNARDO A
8500 W FLAGLER ST #108-A
MIAMI FL 33144**

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

Bernardo A. Villela **BERNARDO A. VILLELA**

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

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW: FEE IS \$61.25

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 **P** ☐ Delete
NAME **VILLELA, BERNARDO A**
STREET ADDRESS **8500 W FLAGLER ST #108-A**
CITY - ST - ZIP **MIAMI FL 33144** **D**

TITLE **S** ☐ Delete
NAME **MORALES, SERGIO**
STREET ADDRESS **1330 SW 59 AVE**
CITY - ST - ZIP **MIAMI FL 33144** **D**

TITLE **T** ☐ Delete
NAME **YON, JULIO**
STREET ADDRESS **7040 SW 24 ST #208**
CITY - ST - ZIP **MIAMI FL 33155** **D**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP **No Change**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP **No Change**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP **No Change**

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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:

Bernardo A. Villela **BERNARDO A. VILLELA** **4-25-03** **(305) 551-2722**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)