

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000005745

**FILED  
Jan 10, 2014  
Secretary of State  
CC1485679930**

**Entity Name:** TAMPA HISPANIC BAR ASSOCIATION, INC.

**Current Principal Place of Business:**

505 EAST JACKSON STREET  
203  
TAMPA, FL 33602

**Current Mailing Address:**

505 EAST JACKSON STREET  
203  
TAMPA, FL 33602

**FEI Number:** 46-3098503

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORTES HODZ, VIVIAN  
505 EAST JACKSON STREET  
203  
TAMPA, FL 33602 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name CRUZ-GARCIA, VICTORIA  
Address P.O. BOX 2879  
City-State-Zip: RIVERVIEW FL 33568

Title PE  
Name VALKENBURG, MIRIAM V  
Address 214 SOUTH ARMENIA AVE  
City-State-Zip: TAMPA FL 33629

Title D  
Name BARBAS, STEPHEN  
Address 1802 W. CLEVELAND STREET  
City-State-Zip: TAMPA FL 33606

Title D  
Name SANCHEZ, GILBERTO E  
Address 201 S. WESTLAND AVE.  
City-State-Zip: TAMPA FL 33606

*I hereby 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 all other like empowered.*

**SIGNATURE:** MIRIAM V VALKENBURG

**PRESIDENT-ELECT**

**01/10/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date