

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000005759

Entity Name: TAMPA HISPANIC BAR FOUNDATION, INC.**Current Principal Place of Business:**609 W. HORATIO STREET
TAMPA, FL 33606**Current Mailing Address:**609 W. HORATIO STREET
TAMPA, FL 33606 US**FEI Number:** 84-1860297**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VALDES, BART
609 W. HORATIO STREET
TAMPA, FL 33606 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	OLIVEROS, ANDRES
Address	P.O. BOX 2714
City-State-Zip:	TAMPA FL 33601

Title	D
Name	IURATO, JENAY
Address	P.O. BOX 2714
City-State-Zip:	TAMPA FL 33601

Title	D
Name	CRUZ-GARCIA, VICTORIA
Address	P.O. BOX 2714
City-State-Zip:	TAMP FL 33601

Title	D
Name	VALKENBURG, MIRIAM
Address	P.O. BOX 2714
City-State-Zip:	TAMPA FL 33601

Title	D
Name	VIERA, LUIS
Address	P.O. BOX 2714
City-State-Zip:	TAMPA FL 33601

Title	T,S
Name	VALDES, BART
Address	609 W. HORATIO STREET
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: BART VALDES**TREASURER****03/23/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date