

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24659

Entity Name: HISPANIC COALITION, CORP.**Current Principal Place of Business:**5659 WEST FLAGLER ST.
MIAMI, FL 33134**Current Mailing Address:**5659 WEST FLAGLER ST.
MIAMI, FL 33134**FEI Number:** 65-0026407**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**KASSE, ROSA E
5659 W. FLAGLER ST.
MIAMI, FL 33134 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 CHAIRMAN
Name GUTIERREZ, VICTOR T
Address 905 BRICKELL BAY DRIVE #530
City-State-Zip: MIAMI FL 33133

Title D
Name PRIETO-VALDEZ, JUAN J
Address 8969 SW 227 TERRACE
City-State-Zip: CUTLER BAY FL 33190

Title DIRECTOR
Name PEREZ, LUIS G.
Address 5659 WEST FLAGLER ST.
City-State-Zip: MIAMI FL 33134

Title DIRECTOR
Name GARZA, MARIA
Address 28300 SW 152 AVENUE
City-State-Zip: LEISURE CITY FL 33009

Title D
Name QUINONES, RENE A
Address P.O. BOX 12566
City-State-Zip: MIAMI FL 33101-2566

Title DIRECTOR
Name CASTILLO, DOMINGO
Address 14821 SW 169 LANE
City-State-Zip: MIAMI FL 33187

Title PRESIDENT
Name KASSE, ROSA E
Address 5659 WEST FLAGLER ST.
City-State-Zip: MIAMI FL 33134

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: ROSA E KASSE**PRESIDENT****03/01/2022**

Electronic Signature of Signing Officer/Director Detail

Date