

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000003654

**Entity Name:** SOUTH FLORIDA HISPANIC CHAMBER OF COMMERCE, INC.

**Current Principal Place of Business:**

333 ARTHUR GODFREY ROAD  
STE 300  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

333 ARTHUR GODFREY ROAD  
SUITE 300  
MIAMI BEACH, FL 33140 US

**FEI Number:** 65-0511241

**Certificate of Status Desired:** No

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

LOPEZ, LILIAM M  
4200 ALTON ROAD  
MIAMI BEACH, FL 33140 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 D  
Name GONZALEZ SILVA, MARIA L  
Address 6855 RED ROAD  
600  
City-State-Zip: CORAL GABLES FL 33143

Title D  
Name TRABANCO, ARMANDO  
Address 2301 NW 87 AVENUE  
City-State-Zip: DORAL FL 33172

Title C  
Name FELIPE, BASULTO  
Address 255 ALHAMBRA CIRCLE  
2ND FLOOR  
City-State-Zip: CORAL GABLES, FL 33134

Title S  
Name LAZARO, MARTINEZ  
Address 161 WESTWARD DRIVE  
City-State-Zip: MIAMI SPRINGS FL 33166

Title DIRECTOR  
Name SANTIAGO, QUINTANA J JR.  
Address 2159 CORAL WAY  
City-State-Zip: MIAMI FL 33145

Title P  
Name LOPEZ, LILIAM M  
Address 4200 ALTON ROAD  
City-State-Zip: MIAMI BEACH FL 33140

*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:** LILIAM M. LOPEZ

**PRESIDENT/CEO**

**01/09/2015**

Electronic Signature of Signing Officer/Director Detail

Date