

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F23000002911

Entity Name: SOCIETY OF HISPANIC PROFESSIONAL ENGINEERS, INC.**Current Principal Place of Business:**13181 CROSSROADS PARKWAY NORTH STE 220
CITY OF INDUSTRY, CA 91746**Current Mailing Address:**13181 CROSSROADS PARKWAY NORTH STE 220
CITY OF INDUSTRY, CA 91746 CA**FEI Number: 72-1549994****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**REGISTERED AGENTS INC
7901 4TH ST N STE 300
ST PETERSBURG, FL 33702 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 VCVF
Name WEBER, MELANIE
Address 13181 CROSSROADS PARKWAY
NORTH STE 220
City-State-Zip: CITY OF INDUSTRY CA 91746

Title PRESIDENT
Name DAVIS, WILLIAM
Address 13181 CROSSROADS PARKWAY
NORTH STE 220
City-State-Zip: CITY OF INDUSTRY 91746

Title S
Name DAVIS, WILLIAM
Address 13181 CROSSROADS PARKWAY
NORTH STE 220
City-State-Zip: CITY OF INDUSTRY CA 91746

Title TREASURER
Name WANGEN, MICHAEL
Address 13181 CROSSROADS PARKWAY
NORTH STE 220
City-State-Zip: CITY OF INDUSTRY 91746

Title SECRETARY
Name DAVILA, ADRIAN
Address 13181 CROSSROADS PARKWAY
NORTH STE 220
City-State-Zip: CITY OF INDUSTRY 91746

Title DIRECTOR
Name RIVERA, ANDREA
Address 13181 CROSSROADS PARKWAY
NORTH STE 220
City-State-Zip: CITY OF INDUSTRY 91746

Title DIRECTOR
Name RAGAN, CARISTA
Address 13181 CROSSROADS PARKWAY
NORTH STE 220
City-State-Zip: CITY OF INDUSTRY 91746

Title DIRECTOR
Name GOMEZ, DIANA
Address 13181 CROSSROADS PARKWAY
NORTH STE 220
City-State-Zip: CITY OF INDUSTRY 91746

Continues on page 2

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: MICHAEL WANGEN**TREASURER****03/23/2024**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GAMBOA, JOAQUIN
Address 13181 CROSSROADS PARKWAY NORTH STE 220
City-State-Zip: CITY OF INDUSTRY 91746

Title DIRECTOR
Name DAVILA-RENDON, NATALIE
Address 13181 CROSSROADS PARKWAY NORTH STE 220
City-State-Zip: CITY OF INDUSTRY 91746

Title DIRECTOR
Name SANTOS, KAREN
Address 13181 CROSSROADS PARKWAY NORTH STE 220
City-State-Zip: CITY OF INDUSTRY 91746

Title DIRECTOR
Name MENDOZA, ROGELIO
Address 13181 CROSSROADS PARKWAY NORTH STE 220
City-State-Zip: CITY OF INDUSTRY 91746