

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 06, 2008 08:00 AM
Secretary of State

DOCUMENT # 725586

1. Entity Name

INSTITUTO DE CULTURA HISPANICA INCORPORATED



Principal Place of Business

**1249 SW 15TH TER
MIAMI FL 33145
US**

Mailing Address

**1825 W 44TH PLACE
1201
HIALEAH FL 33012
US**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-1631323

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LLERENA, TERESA
1249 SW 15TH TER
MIAMI FL 33145**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable).

(NOTE: Registered Agent signature required when reconstituting.)

DATE

FILE NOW: FEE IS \$61.25

Due By: May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME LLERENA, TERESA
STREET ADDRESS 1249 SW 15TH TER
CITY- ST- ZIP MIAMI FL 33145

TITLE VPD ☐ Delete
NAME MARTINEZ, LUISA
STREET ADDRESS 3425 COLLINS AVE #1004
CITY- ST- ZIP MIAMI BEACH FL 33140

TITLE S ☐ Delete
NAME MALEY, BETTY
STREET ADDRESS 10060 CALUSA CLUB DR
CITY- ST- ZIP MIAMI FL 33186

TITLE T ☐ Delete
NAME MARRERO, RUTH
STREET ADDRESS 1825 SW 44 PL 410
CITY- ST- ZIP HIALEAH FL 33012

TITLE ED ☐ Delete
NAME CORNET, MARIA O
STREET ADDRESS 1825 W 44TH PLACE #1201
CITY- ST- ZIP HIALEAH FL 33012

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP
**U00000849816
03/21/08-80036-002 61.25**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

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STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Maria O. Cornet **MARIA ORTA ED**

3/5/08