## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 07, 2001 8:00 am<sup>§</sup> Secretary of State **DOCUMENT # 745891** 1. Entity Name CAMARA DE COMERCIO LATINA DE HIALEAH, INC. 05-07-2001 90028 016 \*\*\*\*61.25 Principal Place of Business Mailing Address 1840 W 49 ST 1840 W 49 ST STE 700 STE 700 HIALEAH FL 33012 HIALEAH FL 33012 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2140991 Not Applicable Zip Country Zip 📞 Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) DEL CASTILLO, EMMA 1840 W 49 ST **#**700 City Zip Code HIALEAH FL 33012 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Department of State **FEE IS \$61.25** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition Change TITLE ☐ Delete TITLE HERNANDZ, DANIEL NAME NAME **5855 W 3RD LANE** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL ED CHAIRMAN of the BOARD ■ Addition Delete Change TITLE TITLE ECHEVARRIA, HERMAÑ NAME NAME STREET ADDRESS 5910 W. 3RD LANE STREET ADDRESS CITY-ST-ZIP HIALEAH FL CITY-ST-ZIP TD ☐ Change ☐ Addition ☐ Delete TITLE HERNANDEZ, B. YVONNE NAME NAME STREET ADDRESS 5855 W. 3RD LANE STREET ADDRESS CITY-ST-7IP HIALEAH FL CITY-ST-ZIP VPD ☐ Delete TITLE ☐ Change ☐ Addition LLANES, ARMANDO NAME NAME 11862 SW 37 TERR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP SECRETARY DIRECTOR Delete **Addition** TITLE BENITEZ, VICTOR NAME NAME 1110 FALCON AVENUE 8345 NW 157 TERR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP MIAMI SPRINGS FL 33/66 TITLE ☐ Delete TITL F ☐ Addition NAME NAME

12. I hereby certify that the information supplied with this filing opes not qualify for the exemption stated in Section 119.07(3)(i), 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 employered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

QLBFWONDE HERDANCEZ