

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2002 8:00 am
Secretary of State

01-16-2002 90013 015 ****61.25

DOCUMENT # 755319

1. Entity Name

INTERNATIONAL SOCIETY FOR HISTORICAL AND SOCIAL STUDIES, INC.

Principal Place of Business

Mailing Address

**915 WEST 70 PLACE
 HIALEAH FL 33014**

**915 WEST 70 PLACE
 HIALEAH FL 33014**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2104916

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FERNANDEZ, FRANK
 915 WEST 70 PLACE
 HIALEAH FL 33014**

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.

SIGNATURE: FRANK FERNANDEZ
 Signature, typed or printed name of registered agent and title if applicable.

[Signature]
 (NOTE: Registered Agent signature required when registering)

1/8/02
 DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DT	<input type="checkbox"/> Delete
NAME	FERNANDEZ, FRANK	
STREET ADDRESS	915 W 70 PLACE	
CITY-ST-ZIP	HIALEAH, FL 00000	
TITLE	DS	<input type="checkbox"/> Delete
NAME	PAREJA, MARIA	
STREET ADDRESS	6885 W 17TH CT	
CITY-ST-ZIP	HIALEAH, FL 00000	
TITLE	PD	<input type="checkbox"/> Delete
NAME	MONTELONGO, LEON	
STREET ADDRESS	309 PINECREST DR	
CITY-ST-ZIP	MIAMI SPRINGS FL 33166	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does 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 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: FRANK FERNANDEZ 1/8/02 305-446-6775

CR2E037 (9/01)