

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 17 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 757175 (5)

1. Corporation Name

HISPANIC HERITAGE COUNCIL, INC.

Principal Place of Business

Mailing Address

4011 W FLAGLER ST STE #503
MIAMI FL 331344011 W FLAGLER ST STE #503
MIAMI FL 33134-16433. Date Incorporated or Qualified
05/01/19813a. Date of Last Report
04/11/19962. Principal Place of Business
21 4011 W. Flagler St.2a. Mailing Address
26 4011 W. Flagler St.4. FEI Number
59-2163593Applied For
Not ApplicableSuite, Apt. #, etc.
22 Suite 204Suite, Apt. #, etc.
27 Suite 2045. Certificate of Status Desired ☐ \$8.75 Additional
Fee RequiredCity & State
23 Miami, FLCity & State
28 Miami, FL6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to FeesZip
24 33134

Country

Zip
29 33134Country
30 USA8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VAZQUEZ, ELOY
4011 W. FLAGLER ST. STE. 503 204
MIAMI FL 3313481 Name ELOY VAZQUEZ
82 Street Address (P.O. Box Number is Not Acceptable)
4011 West Flagler St, Suite 204
83
84 City Miami, FL FL 85 Zip Code 33134

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, to the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

ELOY VAZQUEZ

4/10/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> DELETE
PD	VOLSKY, GEORGE	1008 ALHAMBRA CIRCLE	CORAL GABLES FL	<input checked="" type="checkbox"/>
SD	SPRADLIN, AIDA	8300 NW 53 STREET #104	MIAMI FL	<input checked="" type="checkbox"/>
VD	LLANES, ARMANDO	3191 CORAL WAY	MIAMI FL	<input type="checkbox"/>
TD	MARTINEZ-BARRAQUE, CARLOS	8275 SW 48 STREET	MIAMI FL	<input checked="" type="checkbox"/>
D	VAZQUEZ, ELOY	3430 E 1 AVE	HIALEAH FL	<input type="checkbox"/>
				<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 annual report or supplemental annual 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 of trust as empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, for on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0027210

4/10/97 ELOY VAZQUEZ - DIRECTOR (305) 541-5023

CR2E037 (9/96)