## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT** #

757175

(5)

-	FILE!	D
Jan 27	1998	8:00am
Secre	etary (	of State

HISPA	NIC HERITAGE COUNCIL,	INC.		
Principal Plac	ce of Business	Mailing Address		
4011 W FLAGL STE #204 MIAMI FL 3313 US	-	4011 W FLAGLER STREET STE #204 MIAMI FL 33134 US		3. Date incorporated or Qualified  05/01/1981  4. FEI Number  Applied For
2- Principal F	Place of Business	2a. Mailing Address		59-2163593   Not Applicable  5. Certificate of Status Desired   \$8.75 Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		Fee Required
City & Sta	e	City & State		7. Is this nonprofit corporation a homeowners association?
Zip 24	Country 25		Country 30	8. This corporation owes or has paid the current year letangible Personal Property Tax due June 30.  Yes No
	<ol><li>Name and Address of Curre</li></ol>	nt Registered Agent		10. Name and Address of New Registered Agent
			81 Name	
VAZQUE 4011 WE	z, eloy Est flagler street		82 Street Addre	ess (P.O. Box Number is Not Acceptable)
STE #20	4		83	
MIAMI F	-			
	50101		84 City	85 Zip Code
11. Pursuant	to the provisions of Sections 617.05	02 and 617,1508. Florida Statutes	the above-named corpo	
office or i	egistered agent, or both, in the State	of Florida. Such change was au	thorized by the corporation	oration submits this statement for the purpose of changing its registered on a board of directors. I hereby accept the appointment as registered
	in amilia with, and accept the oblig	janons of, section 617.0503, Flori	ida Siaiules.	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE:	Registered Agent signature require	d when reinstating) DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	SD	☐ DELETE	1.1 TITLE	Change Addition
NAME	PHELAN, JOHN		1,2 NAME	
STREET ADDRESS	799 BRICKELL AVE, #900		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST - ZIP	
TITLE	CD	DELETE	2.1 TITLE C.D	☐ Change 🔀 Addition
NAME	LLANES, ARMANDO	/ \	22 NAME SAN	
STREET ADDRESS	11862 SW 37TH TERR		2.3 STREET ADDRESS 30	IDRA GONZALEZLEYY O NE 2 AVENUE
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP M 1	AMI FL 33132
TITLE	VD	DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	LLANES, ARMANDO		3.2 NAME	
STREET ADDRESS	3191 CORAL WAY		3.3 STREET ADDRESS	
CMY-ST-ZIP	MIAMI FL		3.4. CITY-ST-ZIP	
TITLE	TD	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	FERRER, RAMON		4. 2 NAME	. –
STREET ADDRESS	9250 W FLAGLER STREET		4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP	
TITLE	D	DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	VAZQUEZ, ELOY		5.2 NAME	• —
STREET ADDRESS	3430 E 1 AVE		5.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	Change Addition
NAME				
			6.2 NAME	
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS	

14. 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 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 trustee 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, or on an attact tree; with an address.

**SIGNATURE:** 

1/14/98

(305,541-5023