

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90208 031 ****61.25

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DOCUMENT # 757175

1. Corporation Name

HISPANIC HERITAGE COUNCIL, INC.

Principal Place of Business

4011 W FLAGLER STREET
STE #204
MIAMI FL 33134
US

Mailing Address

4011 W FLAGLER STREET
STE #204
MIAMI FL 33134
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

30

3. Date Incorporated or Qualified

05/01/1981

4. FEI Number

59-2163593

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

VAZQUEZ, ELOY
4011 WEST FLAGLER STREET
STE #204
MIAMI FL 33134

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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, in 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

12. OFFICERS AND DIRECTORS

☒ DELETE

TITLE SD
NAME PHELAN, JOHN
STREET ADDRESS 799 BRICKELL AVE, #900
CITY-ST-ZIP MIAMI FL

☒ DELETE

TITLE CD
NAME LEVY, SANDRA GONZALE
STREET ADDRESS 300 NE 2 AVE
CITY-ST-ZIP MIAMI FL 33132

☒ DELETE

TITLE TD
NAME FERRER, RAMON
STREET ADDRESS 9250 W FLAGLER STREET
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE D
NAME VAZQUEZ, ELOY
STREET ADDRESS 3430 E 1 AVE
CITY-ST-ZIP HIALEAH FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

1.1 TITLE D
1.2 NAME Volsky, George
1.3 STREET ADDRESS 1008 Alhambra Circle
1.4 CITY-ST-ZIP Coral Gables, Fl. 33134

☐ Change ☒ Addition

2.1 TITLE CD
2.2 NAME Simms, Gerardo
2.3 STREET ADDRESS 111 SW 27 Road
2.4 CITY-ST-ZIP Miami, Fl. 33129

☐ Change ☒ Addition

3.1 TITLE D
3.2 NAME Sanchez, Gonzalo
3.3 STREET ADDRESS 3301 Monegro St
3.4 CITY-ST-ZIP Coral Gables, Fl. 33134

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 or 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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED ELOY VAZQUEZ 2/1/99 (305) 541-5028

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)