2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 761856

1. Entity Name
HIALEAH-DADE DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
501 PALM AVENUE HIALEAH, FL 33010	501 PALM AVENUE HIALEAH, FL 33010

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01082004 No Chg-NP   CR2E037 (10/03)

4. FEI Number		Applied For
59-2199599		Not Applicable
5. Certificate of Status Desired		$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOPEZ, VINCENT J
501 PALM AVENUE
HIALEAH, FL 33010

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable.   (NOTE Registered Agent signature required when reinstating)   DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing   **$5.00** May Be
Trust Fund Contribution. ☐   Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	CD
NAME	LOPEZ, VINCENT J
STREET ADDRESS	501 PALM AVE
CITY·ST·ZIP	HIALEAH, FL

TITLE	VCD
NAME	USATEGUI, RAMON
STREET ADDRESS	501 PALM AVE.
CITY·ST·ZIP	HIALEAH, FL

TITLE	SD
NAME	GAVALDA, TERESA
STREET ADDRESS	501 PALM AVENUE
CITY·ST·ZIP	HIALEAH, FL

TITLE	D
NAME	TOLEDO, MARTHA
STREET ADDRESS	501 PALM AVENUE
CITY·ST·ZIP	HIALEAH, FL 33010

TITLE	VS
NAME	RODRIQUEZ, SOE
STREET ADDRESS	501 PALM AVENUE
CITY·ST·ZIP	HIALEAH, FL

TITLE	TD
NAME	CASTELLANOS, PETER
STREET ADDRESS	501 PALM AVENUE
CITY·ST·ZIP	HIALEAH, FL

ПППП0025797
02/02/04-80118-023 70.00

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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: _VINCENT LOPEZ_   1-22-04   305-884-1219
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #