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Jul 15 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000004648 (9)
1. Corporation Name
NATIONAL SOCIETY OF HISPANIC M B A'S INCORPORATE D

Principal Place of Business PO BOX 224747 DALLAS TX 75222-4747	Mailing Address PO BOX 224747 DALLAS TX 75222-4747
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/09/1996	3a. Date of Last Report
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 95-4196238	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
FERNANDEZ, JESUS 13390-A SW91 TERR MIAMI FL 33186 <i>OK AS IS</i>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	(D) Chairperson <input checked="" type="checkbox"/> DELETE	1.1 TITLE	Fundraising Chairperson (D) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME	ESQUIVEL JEANETTE Atristain, Ramiro J.	1.2 NAME	Mendiola, Jose Marco				
STREET ADDRESS	1008 LIVE OAK LN 850 Margate Terr #3A	1.3 STREET ADDRESS	5927 Bond Ct.				
CITY-ST-ZIP	SEABROOK TX 77506 Chicago IL 60640	1.4 CITY-ST-ZIP	Alexandria VA 22315-4603				
TITLE	(D) Chairperson, Emeritus <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME	FERNANDEZ, JESUS	2.2 NAME					
STREET ADDRESS	13390-A SW91 TERR	2.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33186	2.4 CITY-ST-ZIP					
TITLE	(T) France Chairperson <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME	BLANCARTE, JAMES E ESO Tobias, Richard J.	3.2 NAME					
STREET ADDRESS	11377 W OLYMPIC BLVD 17811 Winter Hill	3.3 STREET ADDRESS					
CITY-ST-ZIP	LOS ANGELES CA 90004 San Antonio TX 78258	3.4 CITY-ST-ZIP					
TITLE	(D) Administration Committee <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME	TORREZ-ETHER Villareal, Henry	4.2 NAME					
STREET ADDRESS	2666 OVERLAND AVE #095 9034 E. Pine Valley	4.3 STREET ADDRESS					
CITY-ST-ZIP	LOS ANGELES CA 90004 Scottsdale AZ 85260	4.4 CITY-ST-ZIP					
TITLE	(D) Vice Chairperson <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME	ALVAREZ, MARIA Garcia Katal, Lenda	5.2 NAME					
STREET ADDRESS	251 W 81ST ST #3C 4617 E. Winston Dr.	5.3 STREET ADDRESS					
CITY-ST-ZIP	NY NY 10024 Phoenix AZ 85044	5.4 CITY-ST-ZIP					
TITLE	(S) Legal & Compliance <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME	MUNOZ, ELIZABETH Borczyk, Ramos, Nuris	6.2 NAME					
STREET ADDRESS	5000 LAMADRA AVE 248-3488 Dowe	6.3 STREET ADDRESS					
CITY-ST-ZIP	EL MONTE CA 91731 Bellrose, NY 11426	6.4 CITY-ST-ZIP					

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 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.

CPRE037 (9/96)