2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2007
Secretary of State

DOCUMENT# N00000001206

Entity Name: FLORIDA STATE HISPANIC CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

3970 RCA BOULEVARD
#7010
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

3970 RCA BOULEVARD
#7010
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 59-3625556 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD
#221E
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: FUENTES, JULIO
Address: 3970 RCA BOULEVARD #7010
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DS ( ) Delete
Name: MARTINEZ, PAUL
Address: 3970 RCA BOULEVARD #7010
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DT ( ) Delete
Name: RIVERA, OMAR
Address: 3970 RCA BOULEVARD #7010
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D ( ) Delete
Name: COLLAZO, ALBERT
Address: 3970 RCA BOULEVARD #7010
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D ( ) Delete
Name: CRUZ, CARLOS
Address: 3970 RCA BOULEVARD #7010
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BY A. HOWARD AS ATTORNEY IN FACT D 02/01/2007
Electronic Signature of Signing Officer or Director — Date