

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000004469

FILED
Apr 30, 2003
Secretary of State

Entity Name: PUERTO RICO FESTIVAL COMMITTEE, INC.

Current Principal Place of Business:

605 E 8TH LN
HIALEAH, FL 33010 US

New Principal Place of Business:

Current Mailing Address:

605 E 8TH LN
HIALEAH, FL 33010 US

New Mailing Address:

FEI Number: 65-1025830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VENEGAS, NORAH
1400 SALZEDO ST
401
CORAL GABLES, FL 33134 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: D () Delete
Name: MALDONADO, JACOB
Address: 525 NW 27 AVE
City-St-Zip: MIAMI, FL 33125 US

Title: D () Delete
Name: SANTIAGO, EFRAIN
Address: 151 E 17 ST
City-St-Zip: HIALEAH, FL 33010

Title: D () Delete
Name: RUIZ, GLORIA S
Address: 8569 SW 115 PLACE
City-St-Zip: MIAMI, FL 33173

Title: P/T () Delete
Name: BERMEJO, AL
Address: 605 E 8 LN
City-St-Zip: HIALEAH, FL 33010 US

Title: V/S () Delete
Name: BARO, ALICIA
Address: 15760 SW 148 TERR
City-St-Zip: MIAMI, FL 33196 US

Title: D () Delete
Name: SANTIAGO, DONNA
Address: 151 E 17 ST
City-St-Zip: HIALEAH, FL 33010 US

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:

Title: D (X) Change () Addition
Name: VENEGAS, NORAH
Address: 1400 SALZEDO ST #401
City-St-Zip: CORAL GABLES, FL 33134 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NORAH VENEGAS, MS

D

04/30/2003

Electronic Signature of Signing Officer or Director

Date