


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 28, 2005 8:00 am**  
**Secretary of State**

03-28-2005 90074 011 \*\*\*\*61.25

<b>DOCUMENT # N03000003400</b>	
1. Entity Name PUERTO RICAN BAR ASSOCIATION OF FLORIDA, INC.	

Principal Place of Business 905 BRICKELL BAY DR., FOUR AMBASSADORS TOWER II MEZZANINE, STE. 228 MIAMI, FL 33131	Mailing Address 905 BRICKELL BAY DR., FOUR AMBASSADORS TOWER II MEZZANINE, STE. 228 MIAMI, FL 33131
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**50031190**



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03212005 Chg-NP CR2E037 (10/03)

4. FEI Number 02-0707018	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
ROBLES, RICHARD R ESQ. 905 BRICKELL BAY DR., FOUR AMBASSADORS TOWER II MEZZANINE, STE. 228 MIAMI, FL 33131		Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBLES, RICHARD R ESQ. 905 BRICKELL BAY DR., FOUR AMBASSADORS MIAMI, FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COLLAZO, YESENIA 7850 N.W. 146 STREET, SUITE 403 MIAMI LAKES, FL 33016 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LOPEZ, SAMUEL D ESQ. 629 S.E. 5TH AVE. FT. LAUDERDALE, FL 33301 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOPEZ, JOSEPH F ESQ. 250 BIRD RD., STE. 302 CORAL GABLES, FL 33146 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP D Luis A. Calaisa 501 E. Kennedy Blvd, Suite 1400 Tampa, Florida 33602 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RIVERA, HECTOR R., ESQ 200 S. BISCAYNE BLVD., SUITE 3400 MIAMI, FL 331312397 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Nidia M. Hernandez Esq. 4925 Sheridan Street, Suite 102 Hollywood Florida 33021 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Nidia M. Hernandez*

Date

*3/21/05*

Daytime Phone #

ATTACHMENT

# N03000003400

5003119.0

**Puerto Rican Bar Association  
of Florida, Inc.**



905 Brickell Bay Drive, Four Ambassadors, Tower Two, Mezzanine  
Suite 228, Miami, Florida 33131

**MEMORANDUM**

To: Florida Department of State  
Division of Corporations  
Post Office Box 6198  
Tallahassee, Florida 32314-6198

From: Nydia Menéndez, Secretary

Re: PRBA Correspondence  
and Annual Report

Date: March 21, 2005

Please reply to:  
Nydia Menendez, Esq., at:  
[nydia@menendezlawfirm.com](mailto:nydia@menendezlawfirm.com)  
Telephone: (954) 963-7220  
Facsimile: (954) 963-7232

To Whom It May Concern::

Enclosed please find the 2005 Annual Report, Document Number: N03000003400, for the Puerto Rican Bar Association of Florida. Please note the changes that have been made.

If you have any questions regarding this report, please do not hesitate contact me.