2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005703

Entity Name: WE, HISPANIC WOMEN CHAMBER OF COMMERCE, INC.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1161 CARDINAL CREEK PLACE 6147 SUNNYVALE DR. OVIEDO, FL 32765 ORLANDO, FL 32822

Current Mailing Address: New Mailing Address:

1161 CARDINAL CREEK PLACE 6147 SUNNYVALE DR. OVIEDO, FL 32765 ORLANDO, FL 32822

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CASTELEIRO, GLADYS

1161 CARDINAL CREEK PLACE

OVIEDO, FL 32765 US

CASTELEIRO, GLADYS
6147 SUNNYVALE DR.
ORLANDO, FL 32822 US

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: GLADYS CASTELEIRO 04/30/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DP () Delete Title: DP (X) Change () Addition

 Name:
 CASTELIRO, GLADYS
 Name:
 CASTELIRO, GLADYS

 Address:
 1161 CARDINAL CREEK PLACE
 Address:
 6147 SUNNYVALE DR.

 City-St-Zip:
 OVIEDO, FL OVIEDO FL
 City-St-Zip:
 ORLANDO, FL 32822

Title: D () Delete Title: () Change () Addition

 Name:
 RIVERA, EMERIDA
 Name:

 Address:
 2660 S.W. 37TH AVE., APT. 503
 Address:

 City-St-Zip:
 MIAMI, FL 33133
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

Name: SANTOS, SYLVETTE Name: ACEVEO, NANCY

Address: 2407 JOSEFINA DRIVE Address: 1103 WINTER SPRINGS BLVD City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: WINTER SPRINGS, FL 32708

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: GLADYS CASTELEIRO DP 04/30/2004