2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005842

FILED Mar 28, 2007 Secretary of State

Entity Name: FRIENDS OF THE HIALEAH PUBLIC LIBRARIES, INC.

Current Principal Place of Business: New Principal Place of Business: 190 W 49TH ST HIALEAH, FL 33012 **Current Mailing Address: New Mailing Address:** 190 W 49TH ST HIALEAH, FL 33012 FEI Number: 32-0119892 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DIAZ, DIANE 190 W 49TH ST HIALEAH, FL 33012 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GONZALEZ, FRANCISCO Name: Name: 891 W. 77TH ST. Address: Address: City-St-Zip: HIALEAH, FL 33012 City-St-Zip: Title: () Delete Title: (X) Change () Addition WINGETT, MARY Name: LOPEZ, CARLOS Name: Address: 6510 W. 5TH PLACE Address: 8818 NW 146TH LANE City-St-Zip: HIALEAH, FL 33012 City-St-Zip: MIAMI LAKES, FL 33018 Title: () Delete Title: (X) Change () Addition MILLSTONE, JONI GONI, LITA Name: Name: Address: 18707 NE 14TH AV Address: 3851 SW 143RD AVE City-St-Zip: NORTH MIAMI BEACH, FL 33179 City-St-Zip: MIRAMAR, FL 33027 Title: () Delete Title: () Change () Addition Name: ALDANA, CLARA Name: 7532 NW 176TH TERRACE Address: Address: City-St-Zip: MIAMI, FL 33015 City-St-Zip: Title: () Delete Title: (X) Change () Addition RABASSA, LUIS MILLSTONE, JONI Name: Name: 1820 W. 46TH ST. #507 18707 NE14TH AVE Address: Address: City-St-Zip: HIALEAH, FL 33012 City-St-Zip: NORTH MIAMI BEACH, FL 33179 Title: () Delete Title: () Change () Addition GONZALEZ. MARIA DEL CARM Name: Name: Address: 891 W. 77TH ST. Address: HIALEAH, FL 33012 City-St-Zip: 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: FRANCISCO GONZALEZ P 03/28/2007