

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003393

FILED
Feb 23, 2007
Secretary of State

Entity Name: HISPANIOLA COMMUNITY CENTER, INC.

Current Principal Place of Business:

12550 BISCAYNE BLVD SUITE 500
N MIAMI, FL 33181

New Principal Place of Business:

915 NE 125 TH ST
#106
N MIAMI, FL 33161

Current Mailing Address:

P.O BOX 614072
MIAMI, FL 33261

New Mailing Address:

FEI Number: 20-2622714 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TELFORT, POITEVIEN
12550 BISCAYNE BLVD SUITE 500
N MIAMI, FL 33181 US

Name and Address of New Registered Agent:

TELFORT, POITEVIEN
915 NE 125 TH ST#106
N MIAMI, FL 33161 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: _____

02/23/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TELFORT, POITEVIEN
Address: 12530 BISCAYNE BLVD. SUITE 500
City-St-Zip: N MIAMI, FL 33181

Title: D () Delete
Name: ROUSSEAU, NATASHA
Address: 1251 NE 108TH ST., #120
City-St-Zip: MIAMI, FL 33161

Title: D () Delete
Name: TOUSSAINT, ROSE
Address: 8500 BISCAYNE BLVD. LOT 51032
City-St-Zip: MIAMI, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TELFORT, POITEVIEN
Address: 915 NE 125 TH ST#106
City-St-Zip: N MIAMI, FL 33161

Title: D (X) Change () Addition
Name: LECONTE, MURIELLE
Address: 915 NE 125 TH ST #106
City-St-Zip: MIAMI, FL 33161

Title: D (X) Change () Addition
Name: TOUSSAINT, ROSE
Address: 8500 BISCAYNE BLVD. LOT S1032
City-St-Zip: MIAMI, FL 33138

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: POITEVIEN TELFORT

D

02/23/2007

Electronic Signature of Signing Officer or Director

Date