## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000009285

FILED Jul 04, 2008 Secretary of State

Entity Name: HISPANIC HERITAGE FOUNDATION INC.

Current F	Principal Place of Business:	New Principal Place of Business:	
	DORA DR ALM BEACH, FL 33411		
Current N	Mailing Address:	New Mailing Address:	
	DORA DR ALM BEACH, FL 33411		
n accordar	r: 87-0780814 FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation did n d Address of Current Registered Agent:	FEI Number Not Applicable ( ) Certificate of Status Dot receive the prior notice.  Name and Address of New Registered Age	
	-	Name and Address of New Registered Age	:111.
304 LAKE	O, STELLA R : DORA DR ALM BEACH, FL 33411 US		
	e named entity submits this statement for the te of Florida.	ourpose of changing its registered office or registered ag	ent, or both,
SIGNATU	RE:		
SIGNATU	RE: Electronic Signature of Registered Ag	ent Date	
SIGNATU <b>OFFICER</b>		ent Date  ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR
	Electronic Signature of Registered Ag		DIRECTOR
DFFICER itle: lame: .ddress: city-St-Zip: itle: lame: .ddress:	Electronic Signature of Registered Ages AND DIRECTORS:  O () Delete DIETSCH-WAGNER, RAFAEL A SR 304 LAKE DORA DR.	ADDITIONS/CHANGES TO OFFICERS AND Title: ( ) Change ( ) Addition Name: Address:	DIRECTOR
OFFICER itle: lame: ladress:	Electronic Signature of Registered Ages AND DIRECTORS:  O () Delete DIETSCH-WAGNER, RAFAEL A SR 304 LAKE DORA DR. ROYAL PALM BEACH, FL 33411  O () Delete FURTADO, STELLA R 304 LAKE DORA DR.	ADDITIONS/CHANGES TO OFFICERS AND Title: ( ) Change ( ) Addition Name: Address: City-St-Zip: Title: ( ) Change ( ) Addition Name: Address:	DIRECTOR
DFFICER itle: lame: .ddress: Dity-St-Zip: itle: lame: .ddress: Dity-St-Zip: itle: lame: .ddress:	Electronic Signature of Registered Ages AND DIRECTORS:  O () Delete DIETSCH-WAGNER, RAFAEL A SR 304 LAKE DORA DR. ROYAL PALM BEACH, FL 33411  O () Delete FURTADO, STELLA R 304 LAKE DORA DR. ROYAL PALM BEACH, FL 33411  D () Delete PUMAROL, LEONORA 311 NW 74 ST.	ADDITIONS/CHANGES TO OFFICERS AND Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:	DIRECTOR

I hereby certify that the information supplied with this filing does not qualify 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: STELLA R FURTADO MRS 07/04/2008