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2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

 Entity Nam 	MENT # NO9193 LA HOUSING DEVELOPMENT	O3 MAY - 1 AM II: 01									
00 SW 12TH AVENUE RD FLOOR MAMI FL 33130		Mailing Address 300 SW 12TH AVENUE 3RD FLOOR MIAM: FL 33130 US			RETARY OF STAT Hassee, Floric		RI Biđi li (40)				
2. Principal Place of Business 3. Mi		3. Mailing Address	. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES							
City & State		City & State		J3 2323230		oplied For ot Applicable					
Zip 🕽	Country	Zip	Country	у	5. Certificate of Status Desired		ditional				
	6. Name and Address of Current	Registered Agent				ess of New Registered		.			
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DIAZ, GUARIONE M. 1223 SW 4TH ST				Street Address (P.O. Box Number is Not Acceptable)							
MIAM! FL 33135											
			(City		F	Zip Cod	9			
SIGNATURE											
FILE NOW: FEE IS \$61.25 9. Election Campa Trust Fund Con				— 40.00 May D0							
0.	OFFICERS AND DIF	ECTORS	11.		ADDITIONS/CHANGE	S TO OFFICERS AND I	DIRECTORS IN	10			
ITLE IAME ITREET ADDRESS CITY-ST-ZIP	DE COYTISOLO, AUGUSTIN 1223 SW 4TH ST MIAMI RL 33135	☐ Delete	TITLE NAME STREET A		600 0 05/01/03-	0178236 -01049011	□ Change G □ 6 **61.25	Addition			
ITLE IAME ITREET ADDRESS CITY-ST-ZIP	D DIAZ, GUARTONE M 1223 SW 4TH ST MIAMI FL 33135	☐ Delete	TITLE NAME STREET A CITY-ST-	7(D			☐ Change	Addition			
ITLE IAME STREET ADDRESS STY-ST-ZIP	PAZOS, ANDRES 1223 SW 4TH ST MIAMI FL 33135	Delte Delte	TITLE NAME STREET A CITY-ST-				☐ Change	☐ Addition			
ITLE IAME TREET AODRESS ITY-ST-ZIP	D BECKER, ALINA E 1223 SW 4TH ST MIAMI FL 33135	ne 🗆 Delete	TITLE NAME STREET AI CITY-ST-				Change	Addition			
itle IAME Treet Aodress ITY-ST-ZIP	D SWITZER, RAQUEL C 1223 SW 4TH ST MIAMI FL 33135	□ Delete	TITLE NAME STREET AI CITY-ST-				☐ Change	☐ Addition			
ITLE AME TREET ADDRESS ITY-ST-21P	D FABREGAS, JOSE 1223 SW 4TH ST MIAMI FL 33135	☐ Delete	TITLE NAME STREET A	l l			☐ Change	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:

SIGNATORE REQUIRED

04-211-2003

305-642-3634

NAME

ADDRESS

DIAZ,	Guari	one	M.
Directo	or and	Pres	sident

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Phone #: (305) 642-3484 Fax #: (305) 642-9122

PAZOS, Andres Director and 1223 S.W. 4th Street Miami, FL 33135

Executive Vice-President

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Director

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