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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 20 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N28687

(4)

TEMPLO HISPANO RET-EL, INC.

121411 6	O THOI AND DET EE, INO.					
Principal Place of Business		Mailing Address			T TO BESTUDY AND THOUSE HOUSE DESIGN THE HOUSE DIRECT BEAUT BEAUT BY	
%THOMAS M. N 2821 DURHAM TAMPA FL 3360	ST.	%Thomas M. Montero 2821 Durham St. Tampa Fl. 33605-6227				
					3. Date Incorporated or Qualified 3a. Date of Last Report 07/31/1996	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number Applied For S9-2870661 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23 Zip	Country	28	Count	21	Trust Fund Contribution Added to Fees	
24	25	—	30	У	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
, 1	9. Name and Address of Curren				10. Name and Address of New Registered Agent	
			8	l Name		
	RO, THOMAS M.		8:	Street A	Address (P.O. Box Number is Not Acceptable)	
	IRHAM ST. Fl 33605		8:	1		
IAWFA	rt 33003		L			
			8	City	FL 85 Zip Code	
11. Pursuant office or ragent. La	to the provisions of Sections 617.050 registered agent, or both, in the State im familiar with, and accept the obliga	2 and 617.1508, Florida Statute of Florida. Such change was at alions of, Section 617.0503, Flor	s, the about thorized to ida Statut	ve-named c by the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE						
12.	Signature, typed or printed name of registered age OFFICERS ANI		Registered A	gent signature re	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	MONTERO, THOMAS M.		1.2 NAME			
STREET ADDRESS	2821 DURHAM ST.		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	TAMPA FL	D bruttr	1.4 CITY			
TITLE NAME	RODRIGUEZ, ANDRES	☐ DELETE	2.1 TITLE 2.2 NAME	1	Change Addition	
STREET ADDRESS	1001 E CURTIS ST			T ADDRESS		
CITY-ST-ZIP	TAMPA FL		2. 4 CITY			
TITLE	D	DELETE	3.1 TITLE	······································	☐ Change ☐ Addition	
NAME	CABRERA, JOSE		3.2 NAME			
STREET ADDRESS	3904 ARLINGTON AVE		3.3 STREE	T ADDRESS		
CITY-\$1-ZIP TITLE	TAMPA FL 33603 S	☐ DELETE	3.4. CITY		Change Addition	
NAME	FLORES, ORBELINA	- Ditteir	4. 2 NAM	+	Change C. Addition	
STREET ADDRESS	3625 W. PALMETTO STREET			T ADDRESS		
CITY-ST-ZIP	TAMPA FL		4.4 CITY-			
TITLE	Ţ	☐ DELETE	5.1 TITLE		Change Addition	
NAME	PAEZ, HIPATIA		5.2 NAME			
STREET ADDRESS	2713 DEWEY STREET			T ADDRESS		
CITY-ST-ZIP	TAMPA FL	DELETE	5.4 CITY-		D Charge T Lang.	
TITLE NAME		☐ DETEIE	6.1 TITLE		Change Addition	
STREET ADDRESS			6.2 NAME	T ADDRESS		
City-St-7iP			6.4 CITY			

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

TOWARD ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR