FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name N35011

(8)

SOUTHWEST FLORIDA HISPANIC CHAMBER OF COMMERCE, INC.

Principal Plac	e of Business	Mailing Address			F#1 4F#04 0F01 0F8FF 31011 0F0F1 51011 0F0F1 01011 0F0F1	
		3343 PALM BEACH BLVD. FORT MYERS FL 33916-3717	7			
				3. Date Incorporated or Qua 11/02/1989	alified 3a. Date of Last Report 05/01/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0154409	Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desir	ed \$8.75 Additional Fee Required	
* City & Stat 23	e	City & State		6. Election Campaign Finance Trust Fund Contribution	sing \$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	•	ity for intangible tax under s. 199.032,	
24)	9. Name and Address of Current F		10	Florida Statutes	Yes MNo	
	9, Name and Addiess of Collent F	Jehistoten Whelit	81 Name	10. Name and Address of N		
			oi Name	Javier E D	iàz	
			82 Street	et Address (P.O. Box Number is Not Acceptable)		
12535 NEW BRITTANY BLVD			83	920 1 Lee Ra		
FLMTE	RS FL 33907		**			
			84 City	ft Myers	FL 85 Zip Code 33912	
11. Pursuant	to the provisions of Sections 617.0502 a	and 617.1508, Florida Statutes	, the above-named			
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am flamiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE	Jana E Shan	Treasurer	Sovier 6	Diaz Treasurer	Z-3-97	
	Agnature, typed or printed name of epistered agent a		Registered Agent signature	required when reinstating)	DATE	
12.	OFFICERS AND I		13.		OFFICERS AND DIRECTORS IN 19	
THLE	PD	DELETE	1.1 TITLE	PT	Change Maddition	
NAME	PEREIRA, MOISES		1.2 NAME	Robert Da Frota	e De	
STREET ADDRESS	2569 SW 28TH PL		1.3 STREET ADDRESS	7204 Swan Lak		
CITY-ST-ZIP	CAPE CORAL FL	DELETE	1.4 CITY - ST - ZIP	ft myers, f1.	33919	
TIFLE	VD	□ nereie	2.1 TITLE	SAL BONAVIT	Change Maddition	
NAME	JOHNSON, MARY		2.2 NAME	SAL BONHUIT	LL ROAD	
STREET ADORESS	1060 Vespee DR FT Myers FL		2.3 STREET ADDRESS	FORT MYERS, F	7 33016	
CITY-ST-ZIP TITLE	VD VD	DELETE	2. 4 CITY-ST-ZIP 3.1 THTLE	TD	Change Addition	
NAME	SHERA, RICHARD	Partie and the	3.2 NAME	Javier & Diaz	Publication Feb. September 1	
STREET ADDRESS	3631 WINKLER AVE EXT		3.3 STREET ADDRESS	18201 Lee Rd		
City-St-7/P	FT MYERS FL		3.4. CITY-ST-ZIP	At Myers of 1.	33912	
TITLE	SD	DELETE	4.1 YO'LE			
NAME	WOODMAN MEDINA, DOREENA	٠	4. 2 NAME	Migna Reves		
STREET ADDRESS	2916 SE SANTA BARBARA PL		4.3 STREET ADDRESS	3343 Palm Bch	Blvd	
CITY-ST-7/P	CAPE CORAL FL		4.4 CITY-ST-ZIP	5D Migna Reyes 3343 Palm Bch Ff Myers, FI.	33916	
TITLE	TD	☐ DELETE	5.1 TITLE	VD	Change	
NAME	GONZALEZ, JULIO		5.2 NAME	y •		
STREET ADDRESS	18965 CYPRESS VIEW DR		5.3 STREET ADDRESS			
CITY-ST-ZIP	FT MYERS FL		5.4 CITY-ST-ZIP		,	
TITLE	D	☐ DELETE	6.1 TITLE	VT	Change Addition	
NAME	WHIDDEN, CATHY JO		6.2 NAME	* ^		

SIGNATURE:

STREET ADDRESS

3343 PALM BEACH BLVD

FT MYERS FL

BALLALI BIDIAZ Treasurer

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do 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 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 Alock 13 if changed, or on an attachment with an address.

FILED

Mar 11 1997 8:00am

Secretary of State

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(941)768-2626