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May 01 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N44020** (8)

1. Corporation Name

**HISPANIC CHAMBER OF COMMERCE OF CENTRAL FLORIDA, INC.**

Principal Place of Business

Mailing Address

**3700 34TH STREET  
SUITE 100  
ORLANDO FL 32805  
US**

**3700 34TH STREET  
SUITE 100  
ORLANDO FL 32805  
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**06/24/1991**

4. FEI Number

**59-3103840**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐

**\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

**LEMUS, ANTONIO C PA  
112 MARCIA DRIVE  
ALTAMONTE SPRINGS FL 32714**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

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 familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE

NAME **DE ARRIGOITA, TERESA**  
STREET ADDRESS **280 W CABTON AVE, STE 280**  
CITY-ST-ZIP **WINTER PARK FL**

TITLE **VPD** ☒ DELETE

NAME **GONZALEZ, LINDA**  
STREET ADDRESS **390 N ORANGE AVE, SUITE 850**  
CITY-ST-ZIP **ORLANDO FL**

TITLE **PPD** ☒ DELETE

NAME **DIAZ, VICTOR**  
STREET ADDRESS **1101 N LAKE DESTINY DR, STE 105**  
CITY-ST-ZIP **MAITLAND FL**

TITLE **PED** ☒ DELETE

NAME **PESQUERA, RICARDO**  
STREET ADDRESS **9300 WOODCOCK ROAD, SUITE 234**  
CITY-ST-ZIP **ORLANDO FL**

TITLE **S** ☒ DELETE

NAME **LEMUS, ANTONIO**  
STREET ADDRESS **112 MARCIA DR**  
CITY-ST-ZIP **ALTAMONTE SPRINGS FL**

TITLE **T** ☒ DELETE

NAME **TAMAYO, RAIZA**  
STREET ADDRESS **508 CLIFTON AVENUE**  
CITY-ST-ZIP **ORLANDO FL 32808**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☐ Change ☒ Addition

1.2 NAME **RICARDO R. PESQUERA**  
1.3 STREET ADDRESS **646 EAST COLONIAL DRIVE**  
1.4 CITY-ST-ZIP **ORLANDO, FL 32803**

2.1 TITLE **VPD** ☐ Change ☒ Addition

2.2 NAME **RICK HERNANDEZ**  
2.3 STREET ADDRESS **P.O. BOX 195155**  
2.4 CITY-ST-ZIP **WINTER SPRINGS, FL 32719-5155**

3.1 TITLE **PED** ☐ Change ☒ Addition

3.2 NAME **CEGAR E. CALVET**  
3.3 STREET ADDRESS **200 S. ORANGE AVE**  
3.4 CITY-ST-ZIP **Orlando, FL 32801**

4.1 TITLE **S** ☐ Change ☒ Addition

4.2 NAME **KURT MERKEI**  
4.3 STREET ADDRESS **228 Weber street**  
4.4 CITY-ST-ZIP **Orlando, FL 32803**

5.1 TITLE **T** ☐ Change ☒ Addition

5.2 NAME **MARTA VARGAS-RODRIGUEZ**  
5.3 STREET ADDRESS **800 N. MAGNOLIA AVENUE**  
5.4 CITY-ST-ZIP **Orlando, FL 32803**

6.1 TITLE **AS** ☐ Change ☒ Addition

6.2 NAME **Christina M. Pinto**  
6.3 STREET ADDRESS **15 W. Church street**  
6.4 CITY-ST-ZIP **Orlando, FL 32801**

14. 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 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:

*Ricardo R. Pesquera* **Ricardo R. Pesquera**

**4/22/98**

CR2E037 (10/97)