

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N45338 (3)**  
1. Corporation Name  
**AMERICAN ASSOCIATION OF SALVADOREAN PROFESSIONAL  
S INC.**



Principal Place of Business Mailing Address  
**11420 SW 35TH LN  
MIAMI FL 33165** **11420 SW 35TH LN  
MIAMI FL 33165**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>09/26/1991</b>		3a. Date of Last Report <b>04/10/1995</b>	
21		26		4. FEI Number <b>65-0311679</b>		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
23		28					
Zip		Country		Zip		Country	
24		25		29		30	

## 9. Name and Address of Current Registered Agent

**CHAVEZ, ROBERTO A.  
11420 SW 35TH LN  
MIAMI FL 33165**

## 10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	<b>PRESIDENT</b>
NAME	<b>MEZA, GUIDO</b>	1.2 NAME	<b>Roberto Chavez</b>
STREET ADDRESS	<b>13240 SW 17 LN APT B.</b>	1.3 STREET ADDRESS	<b>11420 SW 35TH</b>
CITY - ST - ZIP	<b>MIAMI, FL 33174</b>	1.4 CITY - ST - ZIP	<b>MIAMI FL 33185</b>
TITLE	VPD	2.1 TITLE	<b>Vice President</b>
NAME	<b>RODRIGUES, RICORDO</b>	2.2 NAME	<b>Mauricio Olate</b>
STREET ADDRESS	<b>9650 SW 152 DR</b>	2.3 STREET ADDRESS	<b>9440 West Flagler 103</b>
CITY - ST - ZIP	<b>MIAMI FL</b>	2.4 CITY - ST - ZIP	<b>MIAMI FL 33174</b>
TITLE	TD	3.1 TITLE	<b>Secretary</b>
NAME	<b>STEVENS, FRANK</b>	3.2 NAME	<b>Dolores Hajara</b>
STREET ADDRESS	<b>14629 SW 95 LN</b>	3.3 STREET ADDRESS	<b>525 SW 66th</b>
CITY - ST - ZIP	<b>MIAMI, FL 33186</b>	3.4 CITY - ST - ZIP	<b>MIAMI FL 33144</b>
TITLE	P	4.1 TITLE	<b>Treasurer</b>
NAME	<b>CHAVEZ, ROBERTO A.</b>	4.2 NAME	<b>Ricardo Dominguez</b>
STREET ADDRESS	<b>11420 SW 35 LN</b>	4.3 STREET ADDRESS	<b>11752 SW 93 Terr.</b>
CITY - ST - ZIP	<b>MIAMI, FL 33165</b>	4.4 CITY - ST - ZIP	<b>MIAMI FL 33186</b>
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/15/96 305 233 2159**  
Date Daytime Phone #

CR2E037 (12/95)