2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 31, 2004 8:00 am DOCUMENT # N46199 **Secretary of State** 1. Entity Name 03-31-2004 90038 043 ****61.25 HISPANIC AMERICAN UNITED METHODIST CHURCH OF HIALEAH, INC. Principal Place of Business Mailing Address 1098 EAST 1RT. AVE % ROBERTO ALVAREZ 0302017 323 EAST 61 STREET HIALEAH FL 33013 HIALEAH FL 33010 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 65-0291437 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AMARO, M. BARBARA ESQ. Street Address (P.O. Box Number is Not Acceptable) 2000 S. DIXIE HIGHWAY SUITE 102 **MIAMI FL 33133** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10. TITLE ☐ Delete TITLE ☐ Change Addition ALVAREZ, ROBERTO NAME NAME 323 E. 61 ST. STREET ADDRESS STREET ADDRESS HIALEAH FL 33013 CITY-ST-7/P CITY-ST-ZIP TITLE SD Delete TITLE ☐ Change X Addition FERNANDEZ, MARIA Y NAME Murciano, Ruth NAME 6560 WEST 13TH AVENUE STREET ADDRESS 563 SW 39th. Ave. STREET ADDRESS HIALEAH FL 33012 CITY-ST-ZIP CITY-ST-ZIP Miami, Fl. 33134 TITLE ☐ Delete TITLE ☐ Change ☐ Addition REYES, ALBERTO M NAME 9949 NW 27TH TERRACE STREET ADDRESS STREET ADDRESS MIAMI FL 33172 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition Gonzalez, Juan NAME NAME 3740 West 5th. Ct. STREET ADDRESS STREET ADDRESS CITY - ST- ZIP Hialeah, Fl. 33012 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

ROBERTO ALVAREZ 3-29-2004 305-821-6033

FILED