

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46199

FILED
Feb 10, 2009
Secretary of State

Entity Name: HISPANIC AMERICAN UNITED METHODIST CHURCH OF HIALEAH, INC.

Current Principal Place of Business:

1098 EAST 1ST.AVE
HIALEAH, FL 33010 US

New Principal Place of Business:

Current Mailing Address:

1098 EAST 1ST AVE
HIALEAH, FL 33010 US

New Mailing Address:

1098 EAST 1ST.AVE
HIALEAH, FL 33010 US

FEI Number: 65-0291437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMARO, M. BARBARA ESQ.
2000 S. DIXIE HIGHWAY
SUITE 102
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CUTIÑO, DIEGO
Address: 1121 S. W. 73 AVE
City-St-Zip: MIAMI, FL 33144

Title: SD () Delete
Name: MURCIANO, RUTH
Address: 563 SW 39TH AVE
City-St-Zip: MIAMI, FL 33134

Title: TD () Delete
Name: SANTIAGO, ESTHER C
Address: 530 N. W. 60 AVE
City-St-Zip: MIAMI, FL 33126

Title: T () Delete
Name: GONZALEZ, JUAN
Address: 3740 WEST 5TH CT
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ESTHER C. SANTIAGO

TD

02/10/2009

Electronic Signature of Signing Officer or Director

Date