

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47289

FILED  
Apr 03, 2009  
Secretary of State

Entity Name: HISPANIC TRANSIT SOCIETY OF DADE COUNTY, INC.

**Current Principal Place of Business:**

6501 SOUTHWEST 139TH COURT  
405  
MIAMI, FL 33183

**New Principal Place of Business:**

12851 SW 42 ST  
107  
MIAMI, FL 33175

**Current Mailing Address:**

P.O. BOX 344246  
HOMESTEAD, FL 33034

**New Mailing Address:**

FEI Number: 63-0828100      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DIAZ, EDWARD  
6501 SOUTHWEST 139TH COURT  
405  
MIAMI, FL 33183 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: PR ( ) Delete  
Name: DIAZ, EDWARD PRES  
Address: 6501SW139 COURT APT 405  
City-St-Zip: MIAMI, FL 33183

Title: RS ( ) Delete  
Name: KOMT, CHARLES  
Address: 3523 SW 65TH AVE  
City-St-Zip: MIAMI, FL 33155

Title: TR ( ) Delete  
Name: TORRES, RICARDO  
Address: 146-20SW 288TH STREET  
City-St-Zip: HOMESTEAD, FL 33177

Title: RS ( ) Delete  
Name: ROSS, EDWARD  
Address: 8428 NW 103RD STREET  
City-St-Zip: MIAMI, FL 33016

**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: EDWARD DIAZ

PR

04/03/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date