

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

FILED
Mar 22 1996 8:00 am
Secretary of State

DOCUMENT # N48327 (3)

1. Corporation Name

DE HOSTOS SENIOR CENTER INC.

Principal Place of Business

2902 NW 2ND AVE.
MIAMI FL 33127

Mailing Address

2902 NW 2ND AVE.
MIAMI FL 33127



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip 25 Country

29 Zip 30 Country

3. Date Incorporated or Qualified

04/07/1992

3a. Date of Last Report

03/03/1995

4. FEI Number

65-0343402

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FERRO, RICHARD ESQ
2828 CORAL WAY
STE. #306
MIAMI FL 33145

81 Name

Gladys Vazquez

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

6200 NW 3 Avenue

83

Miami, FL 33150

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

Gladys Vazquez

(NOTE: Registered Agent signature required when reinstating)

3/1/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☒ DELETE
NAME ARIAS, ROBERTO
STREET ADDRESS 3934 SW 8TH ST.
CITY-STATE-ZIP MIAMI FL

TITLE D ☒ DELETE
NAME QUINTANA, DOROTHY
STREET ADDRESS 263 N.W. 34TH ST.
CITY-STATE-ZIP MIAMI FL 33127

TITLE S ☐ DELETE
NAME VASQUEZ, GLADYS
STREET ADDRESS 6200 NW THIRD AVE
CITY-STATE-ZIP MIAMI FL

TITLE C ☐ DELETE
NAME VELAZQUEZ, HECTOR
STREET ADDRESS 3630 N.E. 1ST COURT
CITY-STATE-ZIP MIAMI FL

TITLE DT ☐ DELETE
NAME BELTRAN, LUIS
STREET ADDRESS 1660 N.W. 15TH ST.
CITY-STATE-ZIP MIAMI FL 33125

TITLE VC ☐ DELETE
NAME BORGES, OSVALDO
STREET ADDRESS 2902 NW 2ND AVE.
CITY-STATE-ZIP MIAMI FL

1.1 TITLE Executive Director ☐ Change ☒ Addition
1.2 NAME Betzaida Ferrer
1.3 STREET ADDRESS 5 Island Avenue Apt. 4-G
1.4 CITY-STATE-ZIP Miami Beach, FL 33139

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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

Betzaida Ferrer
Betzaida Ferrer

March 1, 1996 (305) 573-6200
Date Daytime Phone #

CR2E037 (12/95)

3-22-1996