2002 UNIFORM BUSINESS REPORT (UBR)

Aug 08, 2002 8:00 am Secretary of State **DOCUMENT # N48327** 07-30-2002 90384 016 ****70 00 Entity Name 01-15-2002 90009 049 ****70.00 DE HOSTOS SENIOR CENTER INC. Principal Place of Business Mailing Address 2902 NW 2ND AVE. 2902 NW 2ND AVE 41030 MIAM# FL 33127 MIAMI FL 33127 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0343402 Not Applicable Ziο Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FENTE, MANUEL F ATTY Street Address (P.O. Box Number is Not Acceptable) 1110 BRICKELL AVE 7TH FLR MIAMI FL 33131 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 SIGNATURE Signature, typed or printed name of registered egent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE After September 13, 2002, 9. Election Campaign Financing \$5.00 May Be Make Check Payable to min. will be \$236.25. Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 **EDCF** TITLE BM ☐ Delete TITLE Jose Vega **Addition** NAME COUVERTIER, ESTHER STREET ADDRESS 25 SE 200 AVE ₹. 600 NE 38 ST APT 1007 STREET ADDRESS CITY-ST-ZIP CR2E037 MIAMI FL 33137 CITY-ST-ZIP MTAMI, FZ 33128 TITLE ☐ Delete TITI F sose fulqueira Change NAME Addition GILLIGAN, ELLEN NAME STREET ADDRESS 1230 NE 139 ST UNIT 202 3500 Pan American Dr. STREET ADDRESS MIAMI FL 33161-TC-BM CITY-ST-ZIP Hiami, FC 33130 Delete TITLE ☐ Change NAME EVA Perez Addition RIVERA, GAMALIEL NAME 5900 NE 4D court. STREET ADDRESS 3601 FEDERAL HWY STREET ADDRESS CITY-ST-ZIP <u>Miami</u> Fl. 33137 CITY-ST-7IP <u> Hiami F</u> 33137. TITLE BIJ CT ☐ Deleta MILE Carlos Rodriguez-Quesada Change Addition NAME Beltran, Luis NAME 1660 N.W. 15TH ST. STREET ADDRESS 904 9w 22m Ave STREET ADDRESS CITY-ST-ZIE **MIAMI FL 33125** CITY-ST-7IP <u>Miami, FC 33135</u> VC TITLE ☐ Delete TITLE BORGES, OSVALDO ☐ Change ☐ Addition NAME NAME STREET ADDRESS 2902 NW 2ND AVE. STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-71P TITLE Delete TITLE ☐ Change ROMAN, DANIEL ☐ Addition NAME NAME STREET ADDRESS

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.

STREET ADDRESS

CITY-ST-ZIP

15925 SW 103 LN

MIAMI FL 33196.

CITY-ST-7P

FILED