2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9200000376

City-St-Zip:

MIAMI, FL 33173

FILED Jaņ 06, 2<u>00</u>6 Secretary of State

Entity Name: COLLEGE HISPANIC COUNCIL, INC. **Current Principal Place of Business: New Principal Place of Business:** 9515 SW 136TH STREET MIAMI, FL 33176 **Current Mailing Address: New Mailing Address:** 9515 SW 136TH STREET MIAMI, FL 33176 FEI Number: 65-0372820 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MANUEL J. MARI, P.A. MARI, MARIA C 250 BIRD RD 9515 SW 136TH STREET MIAMI, FL 33176 SUITE 102 CORAL GABLES, FL 33134 US 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: MARIA C MARI 01/06/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CIERESZKO, ANA Name: Name: Address: 7550 SW 61 ST Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: MARI, MARIA C Name: MARI, MARIA C Address: 7800 SW 79 TERR Address: 9515 SW 136TH STREET City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33176 Title: () Delete Title: () Change () Addition ROMAN, ROSARIO Name: Name: 13325 SW 47 ST Address: Address: City-St-Zip: MIAMI, FL 33173 City-St-Zip: Title: (X) Delete Title: () Change () Addition SANCHEZ, CANDIDO Name: Name: Address: 13325 SW 47 ST Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: MARIA C MARI D 01/06/2006