2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 10, 2001 8:00 am Secretary of State DOCUMENT # N9200000488 MIAMI HOUSING AND COMMUNITY DEVELOPMENT CORPORAT 05-10-2001 90063 041 ****70.00 Principal Place of Business Mailing Address 3461 SW 8 ST 3461 SW 8 ST MIAMI FL 33135 MIAMI FL 33135-4107 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 65-0387414 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CAZO, ESPERANZA 3461 SW 8 ST MIAMI FL 33135 City Zip Code FL 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE Delete TITLE ☐ Addition ☐ Change CAZO, ARMANDO NAME NAME STREET ADDRESS 3501 S.W. 8TH ST. 3204 STREET ADDRESS CITY-ST-7IP **MIAM! FL 33135** CITY-ST-ZIP VD. TITLE ☐ Delete ☐ Change ☐ Addition PRADO, ANTONIO NAME STREET ADDRESS 6405 S.W. 50TH ST. STREET ADDRESS CITY-ST-71P **MIAMI FL 33155** CITY-ST-ZIP STD TITLE Delete Change Addition NAME RODRIGUEZ, ANITA STREET ADDRESS 1924 S.W. 25TH ST. STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33133** CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME GARCIA, LEONARDO NAME STREET ADDRESS 2787 N.W. 34TH ST. STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33142** CITY-ST-ZIP TITLE ☐ Change Addition DOMINGUEZ, NEIDA NAME NAME STREET ADDRESS 2620 N.W. 34TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33142

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 of 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 properties because this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if with all other like empowered. indicated on this report or supplemental r of the corporation or the receiver or truste changed, or on an attachment with an ad-

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE: _

RUIZ, GLADYS

MIAMI FL

1917 N.W. 18TH ST.

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE TED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Change

☐ Addition