

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000001703

1. Entity Name

AMERICAN TRANSLATORS ASSOCIATION, FLORIDA CHAPTE

Principal Place of Business

1700 N. DIXIE HWY
SUITE 114
BOCA RATON FL 33432

Mailing Address

PO BOX 14-1057
CORAL GABLES FL 33114
US

2. Principal Place of Business

2301 SW 20th ST

3. Mailing Address

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

Zip

Country

33145-2507 U.S.

Zip

Country

4. FEI Number

65-0482561

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCAVUZZO, CHANTAL
7684 ROCK PORT CIRCLE
LAKE WORTH FL 33467

7. Name and Address of New Registered Agent

Name CONSUELO M. BURRANCA
Street Address (P.O. Box Number is Not Acceptable)
11527 SW 64 ST UNIT "B"
MIAMI
City MIAMI FL Zip Code 33173

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 Consuelo M. Burranca CONSUELO M. BURRANCA Sept 8 '00

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	ZALAMEA, LUIS	
STREET ADDRESS	780 SW 21 RD.	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	WRIST, IRENE	
STREET ADDRESS	8540 SW 133 AVE. RD., SUITE 301	
CITY-ST-ZIP	MIAMI FL 33183	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	LOPEZ, TERESA	
STREET ADDRESS	10300 SW 24TH ST #C31	
CITY-ST-ZIP	MIAMI FL 33165	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	SLAVUZZO, CHANTAL	
STREET ADDRESS	7684 ROCK PORT CIRCLE	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANTONIO PALOMO	
STREET ADDRESS	2301 SW 20th ST.	
CITY-ST-ZIP	MIAMI, FL 33145-2507	
TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TERESA H. LOPEZ	
STREET ADDRESS	10300 SW 24th ST #C-31	
CITY-ST-ZIP	MIAMI, FL 33165-7978	
TITLE	SECRETARY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUTH FERST	
STREET ADDRESS	3304 VIRGINIA ST	
CITY-ST-ZIP	MIAMI, FL 33133	
TITLE	TREASURER	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONSUELO M. BURRANCA	
STREET ADDRESS	11527 SW 64 ST. UNIT "B"	
CITY-ST-ZIP	MIAMI, FL 33173	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE: Consuelo M. Burranca CONSUELO M. BURRANCA Sept 8 '00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)

FILED
Sep 11, 2000 8:00 am
Secretary of State

09-11-2000 90075 048 ****61.25



DO NOT WRITE IN THIS SPACE