

23-97 B-1251 C

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Feb 03 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N94000002565 (9)

1. Corporation Name

HISPANIC HARLEY OWNERS CLUB - SOUTHERN FLORIDA CHAPTER, INC.

Principal Place of Business

Mailing Address

6720 SW 7TH ST  
MIAMI FL 33144  
USP O BOX 164412  
MIAMI FL 33116-4412  
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

29

30

3. Date Incorporated or Qualified  
05/23/19943a. Date of Last Report  
03/15/19964. FEI Number  
65-0501963Applied For  
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution ☐\$5.00 May Be  
Added to Fees8. 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

ZALDIVAR, JULIO  
9210 S.W. 134 PLACE  
MIAMI FL 33186

81 Name

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

83

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VPD ☐ DELETE  
NAME CUADRADO, TRISTAN  
STREET ADDRESS 7030 SW 98 AVE  
CITY-ST-ZIP MIAMI FL1.1 TITLE VP ☒ Change ☐ Addition  
1.2 NAME Willie Alonso  
1.3 STREET ADDRESS 7512 NW 55 Street  
1.4 CITY-ST-ZIP Miami, FL 33166TITLE PD ☐ DELETE  
NAME FERNANDEZ, MARIO  
STREET ADDRESS 6720 SW 7TH ST  
CITY-ST-ZIP MIAMI FL2.1 TITLE P ☒ Change ☐ Addition  
2.2 NAME Carlos Simon  
2.3 STREET ADDRESS 690 W. Park Drive apt 102  
2.4 CITY-ST-ZIP Miami, FL 33172TITLE SD ☐ DELETE  
NAME BOSQUE, RAUL  
STREET ADDRESS 14323 S.W. 106 TERRACE  
CITY-ST-ZIP MIAMI FL 331863.1 TITLE S ☒ Change ☐ Addition  
3.2 NAME Alejandro Vazquez Jr.  
3.3 STREET ADDRESS 3061 NW 7 Street  
3.4 CITY-ST-ZIP Miami, FL 33125TITLE TD ☐ DELETE  
NAME MARBAN, ALEX  
STREET ADDRESS 6406 SW 132 CT CIR  
CITY-ST-ZIP MIAMI FL4.1 TITLE T ☒ Change ☐ Addition  
4.2 NAME Tristan Cuadrado  
4.3 STREET ADDRESS 7030 SW 98 Avenue  
4.4 CITY-ST-ZIP Miami, FL 33173TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 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: *Tristan Cuadrado* Tristan Cuadrado

1/24/97

JOS-BAS-104.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0028214

CR2E037 (9/96)