

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 16, 2002 8:00 am**  
**Secretary of State**

09-16-2002 90097 043 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

**DOCUMENT # N94000002565**

1. Entity Name

**HISPANIC HARLEY OWNERS CLUB - SOUTHERN FLORIDA CHAPTER, INC.**

Principal Place of Business

Mailing Address

3061 N.W 7 STREET  
 SUITE 200  
 MIAMI FL 33125  
 US

3061 N.W 7 STREET  
 SUITE 200  
 MIAMI FL 33125  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0501963

Applied For

Not Applicable

Zip

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

VAZQUEZ, ALEJANDRO  
 3061 N.W 7 STREET  
 SUITE 200  
 MIAMI FL 33125

Name

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

City

FL

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 the obligations of registered agent.

*STAYS AS SHOWN*

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,  
 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
 NAME VAZQUEZ, ALEJANDRO  
 STREET ADDRESS 7225 N AUGUSTA DRIVE  
 CITY-ST-ZIP MIAMI FL 33015 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPD  
 NAME MENDOZA, PEDRO  
 STREET ADDRESS 5934 SW 34 STREET  
 CITY-ST-ZIP MIAMI FL 33155 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD  
 NAME HERNANDEZ, REINALDO  
 STREET ADDRESS 7920 NW 168 TERRACE  
 CITY-ST-ZIP MIAMI FL 33016 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD  
 NAME NASR, JORGE  
 STREET ADDRESS 11760 NW 168 TERRACE  
 CITY-ST-ZIP MIAMI FL 33016 ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VST  
 NAME MIGENIS, JOSE  
 STREET ADDRESS 9951 NW 25 TERRACE  
 CITY-ST-ZIP MIAMI FL 33172 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

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.

*ALEJANDRO VAZQUEZ, PD*

SIGNATURE:

**SIGNATURE REQUIRED**

*9-9-02 305.544-2657*

CR2E037 (4/02)