

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003654

FILED
Jan 06, 2010
Secretary of State

Entity Name: SOUTH FLORIDA HISPANIC CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

333 ARTHUR GODFREY ROAD
STE 410
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

333 ARTHUR GODFREY ROAD
SUITE 410
MIAMI BEACH, FL 33140 US

New Mailing Address:

FEI Number: 65-0511241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, LILIAM M
4200 ALTON ROAD
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D
Name: ABRAMOVICH, ABRAHAM
Address: 1698 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33139

Title: S
Name: LAZARO, MARTINEZ
Address: 161 WESTWARD DRIVE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: D
Name: TRABANCO, ARMANDO
Address: 3001 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

Title: C
Name: LUIS, BOUE
Address: 3001 PONCE DE LEON BLVD., SUITE 211
City-St-Zip: CORAL GABLES, FL 33134

Title: D
Name: GONZALEZ-JACOBO, RAFAEL
Address: 782 N.W. 42 AVE.
City-St-Zip: MIAMI, FL 33125

Title: P
Name: LOPEZ, LILIAM M
Address: 4200 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33140

I hereby 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 all other like empowered.

SIGNATURE: LILIAM M. LOPEZ

CEO

01/06/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date