

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004288

FILED  
Apr 07, 2008  
Secretary of State

**Entity Name:** HISPANIC AMERICAN FIREFIGHTERS ASSOCIATION, INC.

**Current Principal Place of Business:**

80 SW 8 STREET  
1900  
MIAMI, FL 33130 US

**New Principal Place of Business:**

**Current Mailing Address:**

80 SW 8 STREET  
1900  
MIAMI, FL 33130 US

**New Mailing Address:**

**FEI Number:** 65-0532141

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROJAS, ROBERTO  
80 SW 8 STREET  
MIAMI, FL 33130 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 ( ) Delete  
Name: ROJAS, ROBERTO  
Address: 80 SW 8 STREET #1900  
City-St-Zip: MIAMI, FL 33130

Title: D ( ) Delete  
Name: CHAPELIN, JERRY  
Address: 80 SW 8 STREET #1900  
City-St-Zip: MIAMI, FL 33130

Title: D ( ) Delete  
Name: RAMOS, SERGIO  
Address: 80 SW 8 STREET #1900  
City-St-Zip: MIAMI, FL 33130

Title: D ( ) Delete  
Name: NEMETH, GABE  
Address: 80 SW 8 STREET #1900  
City-St-Zip: MIAMI, FL 33130

Title: D ( ) Delete  
Name: BALLESTER, ED  
Address: 80 SW 8 STREET #1900  
City-St-Zip: MIAMI, FL 33130

Title: D ( ) Delete  
Name: LYONS, WILLIAM  
Address: 80 SW 8 STREET  
City-St-Zip: MIAMI, FL 33130

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERTO ROJAS

DIR

04/07/2008

Electronic Signature of Signing Officer or Director

Date