2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 17, 2009
Secretary of State

DOCUMENT# N95000004777

Entity Name: HISPANIC BUSINESS INITIATIVE FUND OF FLORIDA, INC.

Current Principal Place of Business:

315 E. ROBINSON ST., STE. 465
ORLANDO, FL 32801 US

New Principal Place of Business:

Current Mailing Address:

315 E. ROBINSON ST., STE. 465
ORLANDO, FL 32801 US

New Mailing Address:

FEI Number: 59-3341405 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BUSTOS, EDWARD
315 E. ROBINSON ST. STE 465
ORLANDO, FL 32801 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: VALARINO, LIZETTE
Address: 201 ROSALIND AVENUE
City-St-Zip: ORLANDO, FL 32802

Title: O ( ) Delete
Name: BUSTOS, EDWARD
Address: 315 E ROBINSON STREET #465
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete
Name: FERNANDEZ, JOSE
Address: 121 SOUTH ORANGE AVENUE, SUITE 1500
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete
Name: PALACIOS, KIRSTEN
Address: 7401 CYPRESS GARDENS BOULEVARD
City-St-Zip: WINTER HAVEN, FL 33888

Title: D ( ) Delete
Name: THOMAS, MARIA
Address: 215 CELEBRATION PLACE, SUITE 170
City-St-Zip: CELEBRATION, FL 34747

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: D (X) Change ( ) Addition
Name: CARRION, LOU
Address: 315 E ROBINSON STREET #465
City-St-Zip: ORLANDO, FL 32801

Title: D (X) Change ( ) Addition
Name: THOMAS, MARIA
Address: 420 SOUTH ORANGE AVENUE, SUITE 500
City-St-Zip: ORLANDO, FL 32801

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: EDWARD BUSTOS O 06/17/2009
Electronic Signature of Signing Officer or Director — Date