2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004777

FILED Jan 19, 2012 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

315 E. ROBINSON ST. 3201 E. COLONIAL DRIVE

STE 465 STE A20

ORLANDO, FL 32801 US ORLANDO, FL 32803 US

Current Mailing Address: New Mailing Address:

315 E. ROBINSON ST. 3201 E. COLONIAL DRIVE

STE 465 STE A20

ORLANDO, FL 32801 US ORLANDO, FL 32803 US

FEI Number: 59-3341405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SANABRIA, AUGUSTO
315 E. ROBINSON ST. STE 465
ORLANDO, FL 32801 US
SANABRIA, AUGUSTO
3201 E. COLONIAL DRIVE
SUITE A20
ORLANDO FL 22022 LIS

ORLANDO, FL 32803 US

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: AUGUSTO SANABRIA 01/19/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D

 Name:
 BRANDT, CHAD

 Address:
 5575 S SEMORAN BLVD

 City-St-Zip:
 ORLANDO, FL 32822

Title: O

Name: SANABRIA, AUGUSTO

Address: 3201 E. COLONIAL DR STE A20

City-St-Zip: ORLANDO, FL 32803

Title: D

Name: PINTO, CHRISTINA

Address: 111 N. MAGNOLIA AVE, STE 1025

City-St-Zip: ORLANDO, FL 32801

Title: D

Name: GIDUSKO, NANCY

Address: TEAM DISNEY 2 N, 200 LAKE BUENA VISTA DR

City-St-Zip: LAKE BUENA VISTA, FL 32830

Title:

Name: THOMAS, MARIA

Address: 1400 W FAIRBANKS AVE, STE 202

City-St-Zip: WINTER PARK, FL 32789

Title: D

Name: MONTALVO, MICHAEL

Address: 800 NORTH MAGNOLIA AVENUE, STE 900

City-St-Zip: ORLANDO, FL 32803

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: AUGUSTO SANABRIA MR. 01/19/2012