2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 04, 2001 8:00 am³ Secretary of State DOCUMENT # N9600000557 1. Entity Name ALIANZA CIVICA HISPANA DE LA FLORIDA CENTRAL. IN 05-04-2001 90112 041 ****61.25 Principal Place of Business Mailing Address 6220 S. ORANGE BLOSSOM TRL., STE. 142 6220 S. ORANGE BLOSSOM TRL., STE. 142 ORLANDO FL 32809 ORLANDO FL 32809 C0060710 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3477083 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CEPERO, ANGEL 6220 S. ORANGE BLOSSOM TRL., STE. 142 ORLANDO FL 32809 Zip Code City 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition ☐ Delete TITLE TITLE CEPERO, ANGEL NAME NAME STREET ADDRESS STREET ADDRESS 7809 SNOWBERRY CIR. CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32819 Change ☐ Addition ☐ Delete TITLE TITLE BUSTAMANTE, HIRAM NAME NAME STREET ADDRESS 8658 CURRY FORD RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32825 ☐ Change ☐ Addition ☐ Delete TITLE TITLE . PAYAS, ARMANDO NAME NAME 1018 E. ROBINSON ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32801 ☐ Change ☐ Addition ☐ Delete TITLE TITLE RIVERO, JOSE L NAME 15 PINE ARBOR DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32825 Change ☐ Addition TITLE ☐ Delete LORENZO, CARLOS NAME NAME 100 S HUGHEY AVE STREET ADDRESS STREET ADDRESS ORLANDO FL 32801 CITY-ST-ZIP CITY-ST-ZIP

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 trusted 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.

STREET ADDRESS

CITY-ST-7IP

TITLE

NAME

☐ Delete

SIGNATURE

SERRANO, WALDEMAR

APOPKA FL 32712

137 ABBEY HOLLOW DR.

TITLE

NAME STREET ADDRESS

CITY-ST-7IP

☐ Addition