FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

URENA, LUIS

V

C/O 3002 WEST PRICE AVENUE

O. CIAN SHAT

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N96000001978 (3) DOCUMENT #

DOMINICAN PROFESSIONALS AND BUSINESSMEN/WOMEN AS SOCIATION OF THE TAMPA BAY AREA, INC.

Principal Place of Business Mailing Address 3002 WEST PRICE AVENUE 3002 WEST PRICE AVENUE TAMPA FL 33611-3840 **TAMPA FL 33611** 3. Date Incorporated or Qualified 3a. Date of Last Report 04/12/1996 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 59-3372040 Not Applicable 21 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, ☐ Yes 24 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name **AMERILAWYER CHARTERED** 82 Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE 83 **CORAL GABLES FL 33134** Ř4 City Zip Code 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title # applicable (NOTE Registered Agent signature required when re-instating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 1.1 TITLE TITLE NAME SOTO, DAMARIS 1.2 NAME MENDEZ, ANA M. 10411 N. ASHELY ST. C/O 3002 WEST PRICE AVENUE STREET ADDRESS 1.3 STREET ADDRESS **TAMPA FL 33611** CITY-ST-ZIP 1.4 CITY - ST - ZIP TAMPA, FL 33612 DELETE. Change Addition 2.1 TITLE TITLE BENEDICTO, GUSTAVO NAME 2.2 NAME URENA, CLARA C/O 3002 WEST PRICE AVENUE STREET ADDRESS 2.3 STREET ADDRESS 2213 CITRUS VALLEY CIR. PALM HARBOR, FL 34683 **TAMPA FL 33611** 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE ■ Addition TITLE 3.1 TITLE HERRERA, TRUDY NAME 3.2 NAME HERRERA, TRUDY C/O 3002 WEST PRICE AVENUE STREET ADDRESS 3.3 STREET ADDRESS 2815 W.HORATIO ST. #8 **TAMPA FL 33611** CITY-ST-ZIP 3.4. CITY - ST - ZiP TAMPA, FL 33609 DELETE Change Addition 4.1 TITLE TITLE BENEDICTO, GUSTAVO NAME 4. 2 NAME BENEDICTO, GUSTAVO C/O 3002 WEST PRICE AVENUE 4.3 STREET ADDRESS STREET ADDRESS 7607 CORTEZ CT. **TAMPA FL 33611** CITY-ST-ZIP 4.4 CITY-ST-ZIP TAMPA, FL33615 Change Addition A DELETE TITLE 5.1 TITLE GARCIA, RAMON NAME 5.2 NAME CORDERO "IVELISSE C/O 3002 WEST PRICE AVENUE STREET ADDRESS 5.3 STREET ADDRESS 3411 DANNY BRYAN BLVD. TAMPA FL 33611 5.4 CITY - ST - ZIP CITY-ST-ZIP TAMPA, FL 33613 Change Addition DELETE TITLE ñ 6.1 TITLE

STREET ADDRESS C/U 3002 WEST PHICE AVENUE

CITY-ST-ZIP

TAMPA FL 33611

14. I do 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 annual report or supplemental annual 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

ADAMARTS SOTO 04-15-97

CORDERO, LUIS

6.2 NAME

(813)831-1702

FILED

Apr 28 1997 8:00am

Secretary of State

96/6)

13.- ADDITION TO DIRECTOR IN NO.12

D DIAZ, ANTONIO 6013 KNOX ST. TAMPA, FL 33634