

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 10 1998 8:00am
Secretary of State

DOCUMENT # N96000001978 (3)

1. Corporation Name

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

Principal Place of Business

Mailing Address

3002 WEST PRICE AVENUE
TAMPA FL 33611

3002 WEST PRICE AVENUE
TAMPA FL 33611

3. Date Incorporated or Qualified

04/12/1996

4. FEI Number

59-3372040

Applied For

☒ Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME SOTO, DAMARIS
STREET ADDRESS C/O 3002 WEST PRICE AVENUE
CITY-ST-ZIP TAMPA FL 33611

TITLE S ☐ DELETE

NAME URENA, CLARA
STREET ADDRESS 2213 CITRUS VALLEY CIR
CITY-ST-ZIP PALM HARBOR FL

TITLE T ☐ DELETE

NAME HERRERA, TRUDY
STREET ADDRESS 2815 W HORATIO ST, #8
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE

NAME BENEDICTO, GUSTAVO
STREET ADDRESS 7607 CORTEZ CT
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE

NAME CORDERO, IVELISSE
STREET ADDRESS 3411 DANNY BRYAN BLVD
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE

NAME URENA, LUIS
STREET ADDRESS C/O 3002 WEST PRICE AVENUE
CITY-ST-ZIP TAMPA FL 33611

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VP ☐ Change ☒ Addition

1.2 NAME MENDEZ, ANA
1.3 STREET ADDRESS C/O 3002 WEST PRICE AVE
1.4 CITY-ST-ZIP TAMPA, FL 33611

2.1 TITLE D ☐ Change ☒ Addition

2.2 NAME LUIS CORDERO C/O
2.3 STREET ADDRESS 3411 DANNY BRYAN BLVD, TAMPA FL 33611

3.1 TITLE D ☐ Change ☒ Addition

3.2 NAME ANTONIO DIAZ
3.3 STREET ADDRESS 6013 W. KNOX ST
3.4 CITY-ST-ZIP TAMPA, FL 33634

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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.

SIGNATURE: DAMARIS SOTO FRASSICA *Damaris Soto* (813) 831-1702

CP25037 (10/97)