

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90087 036 ****61.25

DOCUMENT # N96000006445	
1. Entity Name National Hispanic Student Foundation, Inc.	

DO NOT WRITE IN THIS SPACE

50010981

2. Principal Place of Business 301 Arthur Godfrey Rd. Suite, Apt. #, etc. 501 Tr 304	3. Mailing Address 4300 Alton Rd. Suite, Apt. #, etc.
City & State Miami Beach, FL	City & State Miami Beach, FL
Zip 33139 Country USA	Zip 33140 Country USA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number 65-0723658		Applied For ☐ Not Applicable
	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
	7. Name and Address of Current Registered Agent		
	Name Liliam M. Lopez Street Address (P.O. Box Number is Not Acceptable) City Miami Beach FL Zip Code 33140		

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) **DATE** _____

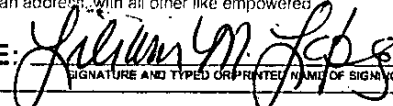
FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman Lazaro Martinez 1111 Lincoln Road, Suite 810 Miami Beach, FL 33139	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Liliam M. Lopez 2457 Collins Avenue, Suite 701 Miami Beach, FL 33140	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Ana Maria Monte Flores 172-A West Flagler Street Miami, FL 33130	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Rodolfo Bustamante 2125 Biscayne Blvd. #361-A Miami, FL 33137	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Nery Gonzalez 220 Alhambra Circle Coral Gables, FL 33134	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Jesus Velazquez 1111 Lincoln Road, Suite 810 Miami Beach, FL 33139	TITLE NAME STREET ADDRESS 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address with all other like empowered.

SIGNATURE:  **Liliam M. Lopez, President / CEC** **2/3/05** **305-534-1903**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **DATE** **Daytime Phone #**

CR2E037B (12/02)