

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006445

FILED
Jan 14, 2008
Secretary of State

Entity Name: SOUTH FLORIDA HISPANIC CHAMBER OF COMMERCE FOUNDATION, INC.

Current Principal Place of Business:

301 ARTHUR GODFEY RD
SUITE 500
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

4200 ALTON RD
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 65-0723658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, LILIAM M
4200 ALTON ROAD
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOPEZ, LILIAM M
Address: 4200 ALTON ROAD
City-St-Zip: MIAMI BCH, FL 33140

Title: C () Delete
Name: MARTINEZ, LAZARO
Address: 1680 MICHIGAN AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: S () Delete
Name: BAGUE, IRELA
Address: 25 MADEIRA
City-St-Zip: CORAL GABLES, FL 33134

Title: T () Delete
Name: BUSTAMANTE, RODOLFO
Address: 3500 NW 51 ST
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: GONZALEZ, NERY
Address: 220 ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: CEPERO, ELOY
Address: 9415 SUNSET, DR. SUITE 175
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: MARTINEZ, LAZARO
Address: 161 WESTWARD DRIVE
City-St-Zip: MIAMI SPRINGS, FL 33165

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LILIAM M. LOPEZ

CEO

01/14/2008

Electronic Signature of Signing Officer or Director

Date