

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000000178

1. Entity Name

HISPANIOLA COMMUNITY SERVICES, INC.

FILED

01 OCT 15 PM 5:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

1350 NE 125TH STREET
#200
NORTH MIAMI FL 33161
US

1350 NE 125TH STREET
#200
NORTH MIAMI FL 33161
US

2. Principal Place of Business

3. Mailing Address

12550 Biscayne Blvd
Suite, Apt. #, etc.
500

12550 Biscayne Blvd
Suite, Apt. #, etc.
500

City & State

City & State

Miami, FL

Miami, FL

Zip

Country

Zip

Country

33181

USA

33181

USA

4. FEI Number

65-0720681

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LISSADE, FLORENCE
590 N.W. 127TH STREET
NORTH MIAMI FL 33168

Name
Florence Lissade

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

1251 NE 108th St #816

City

Miami

FL

Zip Code

33161

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

Florence Lissade

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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-10/30/01-01089--011

*****70/00

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME LOUIS, MARIE E
STREET ADDRESS 42 NE 41 STREET
CITY-STATE-ZIP MIAMI-FL 33137 ☐ Delete

TITLE D
NAME Florence Lissade
STREET ADDRESS 1251 NE 108th St #816
CITY-STATE-ZIP Mia, FL 33161 ☐ Change ☒ Addition

TITLE D
NAME LAWTON, DAMIAN
STREET ADDRESS 13100 NE 7 AVE #211
CITY-STATE-ZIP NORTH MIAMI FL 33161 ☐ Delete

TITLE D
NAME Damian Lawton
STREET ADDRESS 1251 NE 108th St #120
CITY-STATE-ZIP Miami, FL 33161 ☒ Change ☐ Addition

TITLE D
NAME CUMMINGHAM, PAULINE
STREET ADDRESS 18801 2 AVE #103
CITY-STATE-ZIP MIAMI-FL 33162 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE D
NAME BAKALI, KAREN
STREET ADDRESS 202 NW 146 STREET
CITY-STATE-ZIP MIAMI FL 33168 ☒ Delete

TITLE D
NAME Frantz Chery Secretary
STREET ADDRESS 12550 Biscayne Blvd Ste 500
CITY-STATE-ZIP Mia, FL 33181 ☐ Change ☒ Addition

TITLE D
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Delete

TITLE D
NAME Vice-President
STREET ADDRESS Santonax J. Altidor
CITY-STATE-ZIP 197 NW 88th St
Mia, FL 33150 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Florence Lissade

9/22/01

305-459-0754

CR2E037 (10/00)