

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004204

FILED
Apr 28, 2008
Secretary of State

Entity Name: HISPANIC MARKETING & COMMUNICATION ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 565891
MIAMI, FL 332565891 US

New Principal Place of Business:

4130 AURORA STREET SUITE F
CORAL GABLES,, FL 33146 US

Current Mailing Address:

P O BOX 565891
MIAMI, FL 332565891 US

New Mailing Address:

FEI Number: 65-0770430 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEL VALLE, ELENA
11767 S DIXIE HWY #363
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

DEL VALLE, ELENA
9858 CLINT MOORE ROAD C111273
BOCA RATON, FL 33496 US

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: _____

04/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DEL VALLE, ELENA
Address: 11767 S. DIXIE HIGHWAY # 363
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: VELEZ, RICHARD
Address: 8400 NORTHWEST 52ND. STREET, SUITE # 203
City-St-Zip: MIAMI, FL 33166

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DEL VALLE, ELENA
Address: 9858 CLINT MOORE ROAD C111273
City-St-Zip: BOCA RATON, FL 33496

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

Title: TREA () Change (X) Addition
Name: NIETO-VIDAL, SYLVIA
Address: 4130 AURORA STREET SUITE F
City-St-Zip: CORAL GABLES, FL 33146

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: ELENA DEL VALLE

PRS

04/28/2008

Electronic Signature of Signing Officer or Director

Date