

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0073134

FILED

04 MAR 16 AM 9:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CHECK HERE IF MAKING CHANGES

DOCUMENT # N97000004789

1. Entity Name
CENTRO DE CULTURA PUERTORRIQUENA DE LA FLORIDA, INC.



Principal Place of Business
**1309 BLACK WILLOW TRAIL
ALTAMONTE SPRINGS FL 32714
US**

Mailing Address
**P O BOX 940221
MAITLAND FL 32794-0221
US**

2. Principal Place of Business
1548 S. SEMORAN BLVD

3. Mailing Address
P.O. BOX 574316

City & State
ORLANDO FL

City & State
ORLANDO, FL

Zip
32807

Country
ORANGE

Zip
32857-4316

Country
ORANGE

4. FEI Number **59-3461381**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**RIVERA, MIGUEL A
1309 BLACK WILLOW TRAIL
ALTAMONTE SPRINGS FL 32714**

**Judith M. Rojas
2650 Hilliard Ct.
Kissimmee, FL
34744**

7. Name and Address of New Registered Agent

Name
Judith M. Rojas

Street Address (P.O. Box Numbers Not Acceptable)
2650 Hilliard Ct.

City
Kissimmee, FL

Zip Code
34744

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 **Judith M. Rojas** (NOTE: Registered Agent signature required when reinstating)

DATE **200030594722
03/17/04--01015--002 **\$1.25**

FILE NOW: FEE IS \$61.25

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	COBD RIVERA, MIGUEL A 1309 BLACK WILLOW TR ALTAMONTE SPRINGS FL 32714 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD ARCE, TERE 3734 OKEECHOBEE CIRCLE CASSELBERRY FL 32707 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROJAS, JUDITH M 2650 HILLIARD COURT KISSIMMEE FL 34744 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MAGIN, LOPEZ 1166 MAPINI COURT WINTER SPRINGS FL 32708 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SS SANTIAGO, GLADYS 168 RANDALWOOD DR KISSIMMEE FL 34743 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SANTOS, RENE 5006 MONET AVE ORLANDO FL 32812 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COBD ROJAS, JUDITH M. 2650 Hilliard Ct Kissimmee, FL 34744 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD ADRIAN MARTINEZ 1166 MAPINI CT. WINTER SPRINGS, FL 32708 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRUSTEE MATILDE ZAVALA 1548 S. SEMORAN BLVD. ORLANDO, FL 32807 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: **Matilde Zavala**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **2/23/04** Daytime Phone # **(407) 281-4080**

CR2E037 (10/02)