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Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90143 024 ****61.95

04-16-1999 90074 008 *****8.75

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N98000000066

1. Corporation Name

HIALEAH DADE REPUBLICAN COALITION, CORP.

Principal Place of Business

2600 WEST 10TH AVENUE
HIALEAH FL 33010

Mailing Address

2600 WEST 10TH AVENUE
HIALEAH FL 33010

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date incorporated or Qualified

01/07/1998

4. FEI Number

65-0819211

Applied For

Not Applicable

5. Certificate of Status Desired

☒**\$8.75 Additional**
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

CARCAS, CARLOS A
2600 WEST 10TH AVENUE
HIALEAH FL 33010

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETENAME **CARCAS, CARLOS A**
STREET ADDRESS **2600 WEST 10TH AVENUE**
CITY-ST-ZIP **HIALEAH FL 33010**TITLE **VD** ☐ DELETENAME **FERNANDEZ, RICARDO N**
STREET ADDRESS **1131 WEST 10TH AVENUE**
CITY-ST-ZIP **HIALEAH FL 33010**TITLE **SD** ☐ DELETENAME **BARRIOS, TONY**
STREET ADDRESS **2050 W. 55TH ST. #3284**
CITY-ST-ZIP **HIALEAH FL 33016**TITLE **TD** ☒ DELETENAME **GARCIA, ORESTE**
STREET ADDRESS **2834 WEST 75TH STREET**
CITY-ST-ZIP **HIALEAH FL 33016**TITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/99 305-884-2808
 Date Daytime Phone #

CR2E037 (1/98)