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

SIGNATURE:

N9800000599 DOCUMENT # N98000000599 03 AUG 11 PM 1: 16 NEW PATH SUPPORT COMMITTEE FOR THE DOMINICAN REP SEUNCEARY OF STATE TALLAHASSEE, FLORIDA **UBLIC. INC.** Principal Place of Business Mailing Address 4203 N. NEBRASKAN AVE 4203 N. NEBRASKAN AVE TAMPA FL 33803 TAMPA FL 33603 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt, #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 4. FEI Number 59-3496375 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fea Required 8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ERDESTO DE LEUN MARTINEZ, PABLO G Street Address (P.O. Box Number is Not Acceptable) **5619 LARIMER DRIVE** TAMPA FL 33615 8. The above named entity submits this flatement 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. HENESTO BES GON SIGNATURE \$5.00 May Be FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to Trust Fund Contribution. After September 10, 2003, min will be \$236.25 Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. קח Addition (4/03) Delete TITLE TITLE DE LEON, ERNESTO NAME NAME 1904 EAST MCBERRY STREET STREET ADDRESS STREET ADDRESS **TAMPA FL 33610** CITY-ST-ZIP CITY-ST-ZIP ns Addition TITLE Delete TITLE ☐ Chance LIRIANO, EDDY NAME NAME 2540 OAKDALE ST., STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33405 CITY-ST-ZIP CITY-ST-ZIP -JD. TITLE --CONCEPCION, TEMY NAME NAME 4207 N. 12TH STREET STREET ADDRESS STREET ADORESS TAMPA FL 33603 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Change TITE F Delete DE LEON, MARINA NAME NAME 703 E CARACAS STREET ADDRESS STREET ADDRESS **TAMPA FL. 33603** CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE CHIRENO, ANTONIO NAME NAME STREET ADDRESS 1001 E CURTIS ST. STREET ADDRESS TAMPA FL 33603 CHY-ST-7IP CITY-ST-7IP TITLE TITI F ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS C!TY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 impowered 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.

08-06-2003-90055-050 *****61.25