

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000002504

FILED  
Aug 02, 2002  
Secretary of State

**Entity Name:** HIALEAH CHAMBER OF COMMERCE AND INDUSTRY FOUNDATION, INC.

**Current Principal Place of Business:**

1840 WEST 49TH STREET  
SUITE 700  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

1840 WEST 49TH STREET  
SUITE 700  
HIALEAH, FL 33012

**New Mailing Address:**

**FEI Number:** 65-0917086

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHERMAN, PAUL  
1840 W 49 ST  
STE 700  
HIALEAH, FL 33012 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ECHEVARRIA, HERMAN  
Address: 1840 W 49TH ST #700  
City-St-Zip: HIALEAH, FL 33012

Title: V ( ) Delete  
Name: HERNANDEZ, DANIEL  
Address: 1840 W 49TH ST #700  
City-St-Zip: HIALEAH, FL

Title: TD ( ) Delete  
Name: ESTRADA, LUIS  
Address: 1840 49TH ST #700  
City-St-Zip: HIALEAH, FL 33012

Title: SD ( ) Delete  
Name: GRENET, ERNIE  
Address: 1840 W 49TH ST #700  
City-St-Zip: HIALEAH, FL 33012

Title: D ( ) Delete  
Name: DOMINGUEZ, ORLANDO  
Address: 1840 W 49TH ST #700  
City-St-Zip: HIALEAH, FL 33012

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DANIEL HERNANDEZ

V

08/02/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date