

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009528

Entity Name: ASSOCIATION OF HISPANIC MINISTRY OF PALM BEACH
COUNTY INC**Current Principal Place of Business:**2549 NORTH DIXIE HWY
LAKE WORTH, FL 33460**Current Mailing Address:**3119 FOREST HILL BLVD
WEST PALM BEACH, FL 33406 US**FEI Number:** 20-3796322**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RUBIANO, ANGELA M
14 WILLOWBROOK LN #107
DELRAY BEACH, FL 33446 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:** ANGELA M RUBIANO

04/29/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	DISCUA, LUIS
Address	1820 15TH AVE NORTH
City-State-Zip:	LAKE WORTH FL 33460

Title	TREASURER
Name	CARRANZA, ARISTIDIS
Address	3119 FORESTHILL BLVD
City-State-Zip:	WPB FL 33406

Title	OFFICER
Name	ROSADO, GEORGE
Address	1201 HATTERAS CIRCLE
City-State-Zip:	GREENACRES FL 33413

Title	OFFICER
Name	MERCADO, JOSE ROBERTO
Address	3850 LAKEWORTH RD
City-State-Zip:	LAKE WORTH FL 33461

Title	S, SECRETARY
Name	RUBIANO, ANGELA M
Address	14 WILLOWBROOK LN STE #107
City-State-Zip:	DELRAY BEACH FL 33446

Title	VP
Name	PINA, ROSMER
Address	2206 W ATLANTIC AVE STE #101
City-State-Zip:	DELRAY BEACH FL 33445

Title	OFFICER
Name	GOMEZ, MARVIN
Address	5096 FORESTHILL BLVD
City-State-Zip:	WPB FL 33415

I hereby 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 all other like empowered.

SIGNATURE: ANGELA RUBIANO

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04/29/2020

Electronic Signature of Signing Officer/Director Detail

Date