### **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000003654

Entity Name: SOUTH FLORIDA HISPANIC CHAMBER OF COMMERCE, INC.

FILED Feb 08, 2023 Secretary of State 4515878086CC

## **Current Principal Place of Business:**

333 ARTHUR GODFREY ROAD STE 300

MIAMI BEACH, FL 33140

# **Current Mailing Address:**

333 ARTHUR GODFREY ROAD SUITE 300

MIAMI BEACH, FL 33140 US

FEI Number: 65-0511241 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LOPEZ, LILIAM M 4200 ALTON ROAD MIAMI BEACH, FL 33140 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:

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title D Title S

NameKURYLA, ADDYSNameLAZARO, MARTINEZAddress4200 W. FLAGLER STREETAddress161 WESTWARD DRIVECity-State-Zip:CORAL GABLES FL 33143City-State-Zip:MIAMI SPRINGS FL 33166

Title D Title DIRECTOR

Name TRABANCO, ARMANDO Name MENDIETA, ALEJANDRO

Address 9128 N.W. 25 ST.

Address 2100 PONCE DED LEON BLVD.

City-State-Zip: MIAMI FL 33172 600
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR

Name CASAMAYOR MARIA Title P

Name CASAMAYOR, MARIA Title P
Address 780 NW 42 AVENUE Name LOPEZ, LILIAM M

4TH FLOOR Address 4200 ALTON ROAD

City-State-Zip: MIAMI FL 33125 City-State-Zip: MIAMI BEACH FL 33140

Title IMMEDIATE PAST CHAIR Title CHAIRMAN

Name BASULTO, FELIPE FRANCISCO Name SANCHEZ MEDINA, ROLAND

Address 255 ALHMBRA CIRCLE 2ND FLOOR Address 1200 BRICKELL AVENUE

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: MIAMI FL 33131

### Continues on page 2

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: LILIAM M. LOPEZ PRESIDENT/CEO 02/08/2023

Electronic Signature of Signing Officer/Director Detail

Date

### Officer/Director Detail Continued:

Title VICE CHAIR

Name FEBRES, MICHELLE

Address 7705 N.W. 48TH STREET

100

City-State-Zip: DORAL FL 33166

Title CHAIRMAN

Name SANCHEZ-MEDINA, ROLAND JR.

Address 201 ALHAMBRA CIRCLE

1205

City-State-Zip: CORAL GABLES FL 33134

Title CHAIR-ELECT

Name PEREZ DE CORCHO, JOSE

Address 12001 SW 128 CT.

105

City-State-Zip: MIAMI FL 33186

Title DIRECTOR

Name DIAZ, JOSE FELIX

Address 2 ALHAMBRA PLAZA

102

City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR

Name OCHOA, SANDRA

Address 9725 NW 117 AVENUE

City-State-Zip: MIAMI FL 33178

Title DIRECTOR
Name SORI, HENRY

Address 3401 NW 100TH STREET MIAMI

City-State-Zip: MIAMI FL 33167

Title DIRECTOR

Name DAVID, PRUNA

Address 2 ALHAMBRA PLAZA

100

City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR

Name PUIG, CLAUDIA

Address 8551 NW 30TH TERR.

City-State-Zip: DORAL FL 33178