

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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**Jun 12 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 736359
1. Corporation Name
COLOMBIAN-AMERICAN CHAMBER OF COMMERCE OF GREATER MIAMI, INC.

Principal Place of Business: **2355 Salzedo Street Suite 209 Coral Gables, Florida 33134**
Mailing Address: **2355 Salzedo Street Suite 209 Coral Gables, Fl. 33134**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: **21** Suite, Apt. #, etc. **22** City & State **23** Zip **24** Country **25**
2a. Mailing Address: **26** Suite, Apt. #, etc. **27** City & State **28** Zip **29** Country **30**

3. Date Incorporated or Qualified: **07/08/1976**
4. FEI Number: **59-2775981** 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**
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**Woodbridge, Frederick Jr.
100 N. Biscayne Blvd., 21st Floor
Miami, Florida 33132**

10. Name and Address of New Registered Agent
81 Name: Ema Garavito
82 Street Address (P.O. Box Number is Not Acceptable): 2355 Salzedo Street Suite 209
84 City: Coral Gables FL 85 Zip: 33134

11. Pursuant to the provisions of Sections 607.002 and 607.1508, 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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	QUINTERO, ALFREDO	
STREET ADDRESS	801 Brickell Ave. Penthouse 1	
CITY-STATE-ZIP	Miami, Florida	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	LOZANO, ALVARO	
STREET ADDRESS	1890 W. 4th Avenue	
CITY-STATE-ZIP	Hialeah, Florida 33010	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LALINDE JAIME	
STREET ADDRESS	201 S. Biscayne Blvd. #3300	
CITY-STATE-ZIP	Miami, Florida 33131	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	RESTREPO, ANDRES	
STREET ADDRESS	1312 S. Miami Avenue	
CITY-STATE-ZIP	Miami, Florida	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	TARAZONA, MARIA CONSUELO	
STREET ADDRESS	201 S. Biscayne Blvd.	
CITY-STATE-ZIP	Miami, Florida	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	Lalinde, Jaime	
13 STREET ADDRESS	201 S. Biscayne Blvd. #3300	
14 CITY-STATE-ZIP	Miami, Florida 33131	
21 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Ernesto Cordovez	
23 STREET ADDRESS	2 S. Biscayne Blvd. Floor 30	
24 CITY-STATE-ZIP	Miami, Fl 33131	
31 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	DAVILA, VICENTE	
33 STREET ADDRESS	801 Brickell Ave. 18th Floor	
34 CITY-STATE-ZIP	Miami, Fl 33131	
41 TITLE	ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	OLARTE, LUIS	
43 STREET ADDRESS	P.O. Box 520886	
44 CITY-STATE-ZIP	Miami, Fl 33152-0886	
51 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	ROJAS, MARCO	
53 STREET ADDRESS	520 Brickell Key Dr.-Suite 0-305	
54 CITY-STATE-ZIP	Miami, Fl 33129	
61 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-STATE-ZIP		

14. I hereby certify that the information furnished on this form is true and correct to the best of my knowledge and belief, and that I am an officer or director of the corporation, and am authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in the Report of the Board of Directors.

SIGNATURE: *[Signature]* **Ernesto Cordovez 4/22/98 (305) 446-2342**

CR2E034 (10/97)

Hernando Díaz

13499 Biscayne Blvd. #210
North Miami, Fl 33181

Elsa Villamizar

7220 NW 36th Street - Suite 500
Miami, Fl 33166

Julio Germán Pérez

8125 NW 53rd Street - Suite 111
Miami, Fl 33166

Manuel Manotas

1150 S. Miami Avenue
Miami, Fl 33130

George Mencio

701 Brickell Avenue - Site 3000
Miami, Fl 33131

Juan Ucros

1390 Brickell Avenue - 5th Floor
Miami, Fl 33131

Fernando Echeverri

3 Grove Isle Drive - Suite 1601
Miami, Fl 33133

Armando José Díaz

135 East Enid Dr.
Key Biscayne, Fl 33149

Geoffrey Randall

201 S. Biscayne Blvd - 16th Floor
Miami, Fl 33131

William Patiño

100 West Cypress Creek rd. - 7th Floor
Fort Lauderdale, Fl 33309

Luis Javier Chavarriaga
3625 NW 82nd Avenue - Suite 211
Miami, Fl 33166

Daniel Ferrez
1401 Brickell Avenue #1500
Miami, Fl 33131

Fred Woodbridge
100 N. Biscayne Blvd - Suite 2100
Miami, Fl 33132

Enrique Córdoba
One Herald Plaza
Miami, Fl 33132-1693

Juan Carlos Zapata
2355 Salzedo Street - Suite 314
Coral Gables, Fl 33134

Mauricio Jaramillo
7901-05 NW 21 Street
Miami, Fl 33126

Juan B. Echeverri
43 Samana Drive
Miami, Fl 33133