2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003652

FILED Apr 23, 2005 Secretary of State

Entity Name: TOGO-USA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business: New Principal Place of Business:

1709 S W 10TH STREET 12973 SW 112 ST

FORT LAUDERDALE, FL 33312 200

MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

P. O. BOX 9822

FORT LAUDERDALE, FL 333109822

FEI Number: 56-2403941 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NOUKAFOU, NARCISSE
1709 S W 10TH STREET
FORT LAUDERDALE, FL 33312 US

NOUKAFOU, NARCISSE
12973 SW 112 ST
200

MIAMI, FL 33186 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: N. NOUKAFOU 04/23/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: NOUKAFOU, NARCISSE Name: NOUKAFOU, NARCISSE

 Name:
 NOUKAFOU, NARCISSE
 Name:
 NOUKAFOU, NARCIS

 Address:
 1709 S W 10TH STREET
 Address:
 12973 SW 112 ST

 City-St-Zip:
 FORT LAUDERDALE, FL 33312
 City-St-Zip:
 MIAMI, FL 33186

Title: S () Delete Title: () Change () Addition

 Name:
 SILVERA, KENNETH
 Name:

 Address:
 1709 S W 10TH STREET
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33312
 City-St-Zip:

Title: () Delete Title: VP () Change (X) Addition

 Name:
 Name:
 PODONA, TCHAO

 Address:
 Address:
 12973 SW ST

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33186

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: N. NOUKAFOU P 04/23/2005