

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011340

FILED  
May 01, 2009  
Secretary of State

Entity Name: DORAL CHAMBER OF COMMERCE INC

## Current Principal Place of Business:

8181 NW 36TH ST  
31  
DORAL, FL 33166

## New Principal Place of Business:

8181 NW 36TH ST  
20-E  
DORAL, FL 33166

## Current Mailing Address:

8181 NW 36TH ST  
31  
DORAL, FL 33166

## New Mailing Address:

8181 NW 36TH ST  
20-E  
DORAL, FL 33166

FEI Number: 26-1465456      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

SARMIENTO, EMMANUEL JR  
8181 NW 36 ST  
31  
DORAL, FL 33166 US

## Name and Address of New Registered Agent:

SARMIENTO, EMMANUEL JR  
8181 NW 36 ST  
20-E  
DORAL, FL 33166 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: EMMANUEL SARMIENTO JR

05/01/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SARMIENTO, EMMANUEL JR  
Address: 8181 NW 36 ST, SUITE 31  
City-St-Zip: DORAL, FL 33166

Title: VP ( ) Delete  
Name: CABRERA, JM  
Address: 8181 NW 36 ST, SUITE 31  
City-St-Zip: DORAL, FL 33166

Title: VP,S (X) Delete  
Name: RUBIO, ROLANDO  
Address: 8181 NW 36 ST, SUITE 31  
City-St-Zip: DORAL, FL 33166

Title: VP,T (X) Delete  
Name: BERTRAM, CONNIE E  
Address: 8181 NW 36 ST, SUITE 31  
City-St-Zip: DORAL, FL 33166

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, S (X) Change ( ) Addition  
Name: SARMIENTO, EMMANUEL JR  
Address: 8181 NW 36 ST, SUITE 31  
City-St-Zip: DORAL, FL 33166

Title: VP,T (X) Change ( ) Addition  
Name: CARMENATES, NELSON  
Address: 8181 NW 36 ST, SUITE 20-I  
City-St-Zip: DORAL, FL 33166

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 exemption stated in Chapter 119, 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: EMMANUEL SARMIENTO JR

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date