

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27911

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** ECUADORIAN-AMERICAN CHAMBER OF COMMERCE OF GREATER MIAMI, INC.

**Current Principal Place of Business:**

3403 NW 82ND AVENUE  
SUITE 310  
MIAMI, FL 33122

**New Principal Place of Business:**

**Current Mailing Address:**

3403 NW 82ND AVENUE  
SUITE 310  
MIAMI, FL 33122

**New Mailing Address:**

**FEI Number:** 65-0191036      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

TERNEUS, CARMEN CPA  
2913 BIRD AVENUE  
MIAMI, FL 33122 US

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

LOPEZ, RUBEN CPA  
3403 NW 82ND AVENUE  
SUITE 310  
MIAMI, FL 33122 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: LOPEZ RUBEN

05/01/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MALO, JUAN J  
Address: 3403 NW 82ND AVENUE, SUITE 310  
City-St-Zip: MIAMI, FL 33122

Title: VP ( ) Delete  
Name: FREILE, GUILLERMO  
Address: 3403 NW 82ND AVENUE, SUITE 310  
City-St-Zip: MIAMI, FL 33122

Title: TD ( ) Delete  
Name: PAZ, RINA  
Address: 3403 NW 82ND AVENUE, SUITE 310  
City-St-Zip: MIAMI, FL 33122

Title: SD ( ) Delete  
Name: AGUIRRE, FRANCISCO  
Address: 3403 NW 82ND AVENUE, SUITE 310  
City-St-Zip: MIAMI, FL 33122

Title: D ( ) Delete  
Name: RUIZ, GERMAN P  
Address: 3403 NW 82ND AVENUE, SUITE 310  
City-St-Zip: MIAMI, FL 33122

Title: D ( ) Delete  
Name: ACOSTA, EVAN  
Address: 3403 NW 82ND AVENUE, SUITE 310  
City-St-Zip: MIAMI, FL 33122

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MALO JUAN JOSE

PD

05/01/2008

Electronic Signature of Signing Officer or Director

Date