

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 16, 2004  
Secretary of State**

DOCUMENT# N99000001877

Entity Name: SIGMA PHI EPSILON FLORIDA GAMMA CHAPTER ALUMNI BOARD, INC.

**Current Principal Place of Business:**

ONE BISCAYNE TOWER, SUITE 2400  
2 SOUTH BISCAYNE BLVD  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

ONE BISCAYNE TOWER, SUITE 2400  
2 SOUTH BISCAYNE BLVD  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 65-0922880      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ARCHAMBAULT, LOUIS P ESQ.  
ONE BISCAYNE TOWER, SUITE 2400  
2 SOUTH BLVD.  
MIAMI, FL 33131 US

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

ARCHAMBAULT, LOUIS P  
ONE BISCAYNE TOWER, SUITE 2400  
2 SOUTH BLVD.  
MIAMI, FL 33131 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: LOUIS ARCHAMBAULT      01/16/2004  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: ARCHAMBAULT, LOUIS  
Address: 150 W. FLAGLER ST, SUITE 2850 PENTHOUSE  
City-St-Zip: MIAMI, FL 33130

Title: D ( ) Delete  
Name: GARCIA-PONS, CESAR M  
Address: 8311 SW 27TH AVE  
City-St-Zip: MIAMI, FL 33155

Title: DT ( ) Delete  
Name: MEDINA, REY  
Address: 8751 GATEHOUSE ROAD, #7  
City-St-Zip: PLANTATION, FL 333243144

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

Title: DP (X) Change ( ) Addition  
Name: ARCHAMBAULT, LOUIS  
Address: ONE BISCAYNE TOWER, S2400, 2 S. BISCAYNE B  
City-St-Zip: MIAMI, FL 33130

Title: D (X) Change ( ) Addition  
Name: SCOTTLAND, ROBERT  
Address: 4775 COLLINS AVE., APT. 240  
City-St-Zip: MIAMI BEACH, FL 33140

Title: DT (X) Change ( ) Addition  
Name: MEDINA, REY  
Address: 8751 GATEHOUSE ROAD, #7  
City-St-Zip: PLANTATION, FL 33324

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: LOUIS ARCHAMBAULT      DP      01/16/2004  
Electronic Signature of Signing Officer or Director      Date