

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011340

Entity Name: DORAL CHAMBER OF COMMERCE INC**Current Principal Place of Business:**2900 NW 112TH AVE
UNIT 1
DORAL, FL 33172**Current Mailing Address:**2900 NW 112TH AVE
UNIT 1
DORAL, FL 33172 US**FEI Number: 26-1465456****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SARMIENTO, EMMANUEL
2900 NW 112TH AVE
UNIT 1
DORAL, FL 33172 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**04/28/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name SARMIENTO, EMMANUEL
Address 2900 NW 112TH AVE
UNIT 1
City-State-Zip: DORAL FL 33172

Title DIRECTOR
Name BOUZA-MERIDA, CARIDAD
Address 2900 NW 112TH AVE
UNIT 1
City-State-Zip: DORAL FL 33172

Title DIRECTOR
Name RODRIGUEZ, CESAR
Address 2900 NW 112TH AVE
UNIT 1
City-State-Zip: DORAL FL 33172

Title DIRECTOR
Name DE JESUS, BLANCHE R
Address 2900 NW 112TH AVE
UNIT 1
City-State-Zip: DORAL FL 33172

Title VP, T
Name LOPEZ, CARMEN L
Address 2900 NW 112TH AVE
UNIT 1
City-State-Zip: DORAL FL 33172

Title DIRECTOR
Name MERIDA, JOSE A
Address 2900 NW 112TH AVE
UNIT 1
City-State-Zip: DORAL FL 33172

Title DIRECTOR
Name DOMINGUEZ, FELIPE
Address 2900 NW 112TH AVE
UNIT 1
City-State-Zip: DORAL FL 33172

I hereby 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 all other like empowered.

SIGNATURE: EMMANUEL SARMIENTO**PRESIDENT****04/28/2018**

Electronic Signature of Signing Officer/Director Detail

Date