## **2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000011340

Entity Name: DORAL CHAMBER OF COMMERCE INC

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**Current Principal Place of Business:** 

8232 NW 14TH STREET DORAL, FL 33126

**Current Mailing Address:** 

8232 NW 14TH STREET DORAL, FL 33126 US

FEI Number: 26-1465456 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEREGONZA THE ATTORNEYS, PLLC 5201 BLUE LAGOON DR SUITE 290 MIAMI, FL 33126 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: JUAN J. PEREZ 04/27/2022

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title P Title VP, T

NameSARMIENTO, EMMANUELNameLOPEZ, CARMEN LAddress8232 NW 14TH STREETAddress8232 NW 14TH STREET

City-State-Zip: DORAL FL 33126 City-State-Zip: DORAL FL 33126

Title DIRECTOR Title DIRECTOR

NameBOUZA-MERIDA, CARIDADNameRODRIGUEZ, CESARAddress8232 NW 14TH STREETAddress8232 NW 14TH STREETCity-State-Zip:DORAL FL 33126City-State-Zip:DORAL FL 33126

Title DIRECTOR Title DIRECTOR

Name DOMINGUEZ, FELIPE Name ESTEVEZ, AZAHY

Address 8232 NW 14TH STREET Address 8232 NW 14TH STREET

City-State-Zip: DORAL FL 33126 City-State-Zip: DORAL FL 33126

Title DIRECTOR Title DIRECTOR

NamePEREZ, JUAN JNameGONZALEZ, ROBERTOAddress8232 NW 14TH STREETAddress8232 NW 14TH STREETCity State Zip:DORAL EL 22126City-State-Zip:DORAL EL 23126

City-State-Zip: DORAL FL 33126 City-State-Zip: DORAL FL 33126

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

P 04/27/2022

FILED Apr 27, 2022

**Secretary of State** 

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