

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000000165

**Entity Name:** HONDURAN-USA CHAMBER OF COMMERCE, INC.

**FILED**  
**Apr 30, 2015**  
**Secretary of State**  
**CC7274651051**

**Current Principal Place of Business:**

10570 NW 27TH ST.  
BUILDING H-102  
MIAMI, FL 33172

**Current Mailing Address:**

10570 NW 27TH ST.  
BUILDING H-102  
MIAMI, FL 33172

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: Yes**

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

CARDET, ESQ., ALBERT  
10570 NW 27TH ST. H-102  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name ENAMORADO, ARTURO E  
Address 10570 NW 27TH ST. H-102  
City-State-Zip: DORAL FL 33172

Title VP  
Name RIVERA, JOSE LUIS  
Address 10570 NW 27TH ST. H-102  
City-State-Zip: DORAL FL 33172

Title VP  
Name ENAMORADO-CERRATO, CELINA  
Address 10570 NW 27TH ST.  
City-State-Zip: DORAL FL 33172

Title T  
Name PIEDRAHITA, VANESSA  
Address 10570 NW 27TH ST. H-102  
City-State-Zip: DORAL FL 33172

Title MGRM  
Name HONDURANAMERICANCHAMBEROFC  
OMMERCEWORLDWIDE  
Address 10570 NW 27TH ST. H-102  
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: ARTURO ENAMORADO - P**

**PRESIDENT**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date