

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722008

FILED
Mar 31, 2009
Secretary of State

Entity Name: WORLD TRADE CENTER MIAMI, INC.

Current Principal Place of Business:

1007 N. AMERICA WAY
SUITE 500
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

1007 N. AMERICA WAY
SUITE 500
MIAMI, FL 33132

New Mailing Address:

FEI Number: 59-1369971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLOGLY, CHARLOTTE
1007 N. AMERICA WAY
SUITE 500
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: SCHWARTZ, DANIEL
Address: 1001 BRICKELL BAY DRIVE, 19TH FLOOR
City-St-Zip: MIAMI, FL 33131

Title: P () Delete
Name: CHARLOTTE, GALLOGLY,
Address: 1007 N. AMERICA WAY, SUITE 500
City-St-Zip: MIAMI, FL 33132

Title: PC () Delete
Name: MELO, FERNANDO
Address: 355 ALHAMBRA CIRCLE, SUITE 1201
City-St-Zip: CORAL GABLES, FL 33134

Title: C () Delete
Name: PEREZ-JONES, JOSE
Address: 8050 NW 79TH AVE.
City-St-Zip: MIAMI, FL 33166

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: C (X) Change () Addition
Name: PEREZ-JONES, JOSE
Address: 8001 NW 79TH AVE.
City-St-Zip: MIAMI, FL 33166

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: CHARLOTTE GALLOGLY

P

03/31/2009

Electronic Signature of Signing Officer or Director

Date