2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#730854

FILED Jan 10, 2007 Secretary of State

Entity Name: THE GERMAN SHEPHERD DOG CLUB OF GREATER MIAMI, INC.

Current Principal Place of Business: New Principal Place of Business: 13015 SW 89 PL, BOX 186 MIAMI, FL 33176 **Current Mailing Address: New Mailing Address:** 13015 SW 89 PL, BOX 186 MIAMI, FL 33176 FEI Number: 59-1635085 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LIEBERMAN, SHEILA 13643 SW 92 CT MIAMI, FL 33176 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PEREZ-GURRI, JOSE DR. Name: Name: 13015 SW 89 PL, BOX 186 Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: () Delete Title: (X) Change () Addition NOYA, CHRISTINE Name: LIEBERMAN, SHEILA Name: Address: 1385 SW 143 CT Address: 13643 SW 92 CT City-St-Zip: MIAMI, FL 33184 City-St-Zip: MIAMI, FL 33176 Title: () Delete Title: () Change () Addition LIEBERMAN, SHEILA Name: Name: 13643 SW 92 CT. Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: () Delete Title: () Change () Addition Name: GURRI, KATHY PEREZ Name: 9395 SW 106 STREET Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: () Delete Title: (X) Change () Addition ISALGUE, KAREN NOYA, JORGE Name: Name: 10501 SW 99TH AVE 1385 SW 143 CT Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: MIAMI, FL 33184 Title: () Delete Title: (X) Change () Addition HIRAM, ISALGUE PUMARIEGA, AL Name: Name: Address: 10501 SW 99 AVE Address: 1500 SW 142 AVE MIAMI, FL 33176 MIAMI, FL 33184 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SHEILA LIEBERMAN S 01/10/2007