

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 13, 2009
Secretary of State**

DOCUMENT# 730854

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

Current Principal Place of Business:

13015 SW 89 PL, BOX 186
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

13015 SW 89 PL, BOX 186
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 59-1635085 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIEBERMAN, SHEILA
13643 SW 92 CT
MIAMI, FL 33176 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: P () Delete
Name: PEREZ-GURRI, JOSE DR.
Address: 13015 SW 89 PL, BOX 186
City-St-Zip: MIAMI, FL 33176

Title: VP () Delete
Name: LIEBERMAN, SHEILA
Address: 13643 SW 92 CT
City-St-Zip: MIAMI, FL 33176

Title: S () Delete
Name: LIEBERMAN, SHEILA
Address: 13643 SW 92 CT.
City-St-Zip: MIAMI, FL 33176

Title: T () Delete
Name: GURRI, KATHY PEREZ
Address: 9395 SW 106 STREET
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: PUENTE, IGNACIO
Address: 1950 SW 33 CT
City-St-Zip: MIAMI, FL 33145

Title: D () Delete
Name: CAMPO, MANUEL
Address: 11551 SW 93 ST
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CAMPO, MANUEL DR.
Address: 13015 SW 89 PL, BOX 186
City-St-Zip: MIAMI, FL 33176

Title: VP (X) Change () Addition
Name: PUENTE, IGNACIO
Address: 1950 SW 33 CT,
City-St-Zip: MIAMI, FL 33145

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: D (X) Change () Addition
Name: PREREZ-GURRI, JOSE DR
Address: 9395 SW 106 ST
City-St-Zip: MIAMI, FL 33176

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: SHEILA LIEBERMAN

S

04/13/2009

Electronic Signature of Signing Officer or Director

Date