

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740583

FILED
Apr 09, 2007
Secretary of State

Entity Name: THE ARCHITECTURAL CLUB OF MIAMI, INC.

Current Principal Place of Business:

705 JEFFERSON AVE
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 190427
MIAMI BEACH, FL 33119 US

New Mailing Address:

FEI Number: 59-1778716 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BEHAR, ROBERTO
705 JEFFERSON AVE
MIAMI BEACH, FL 33139 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: D () Delete
Name: BEHAR, ROBERTO M.,
Address: 705 JEFFERSON AVE.
City-St-Zip: MIAMI BEACH, FL 33139

Title: VD () Delete
Name: ROOT, MONA,
Address: 2040 N.E. 198TH TERR.
City-St-Zip: N. MIAMI BEACH, FL

Title: VD () Delete
Name: GUYTON, ELIZABETH,
Address: 4765 SW 80TH ST.
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: PONCE DE LEON, MONIC, A
Address: 11745 SW 132ND CT.
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: TEOFILO, VICTORIA,
Address: 1928 S. MIAMI AVE.
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: TRELLES, LUIS,
Address: 169 E FLAGLER ST., SUITE 828
City-St-Zip: MIAMI, FL

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: ROSARIO, MARQUARDT
Address: 705 JEFFERSON AVE
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: () Change () Addition
Name:
Address:
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: ROBERTO BEHAR

D

04/09/2007

Electronic Signature of Signing Officer or Director

_____ Date