

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750879

FILED
Jul 19, 2007
Secretary of State

Entity Name: INDUSTRIAL ASSOCIATION OF DADE COUNTY, INC.

Current Principal Place of Business:

338 MINORCA AVE
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

338 MINORCA AVE
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 59-1988078 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KALLERGIS, NICK
338 MINORCA AVE
CORAL GABLES, FL 33134 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DIXON, THOMAS J
Address: 338 MINORCA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: VP () Delete
Name: KOHN, RON
Address: 338 MINORCA AVE
City-St-Zip: CORAL GABLES, FL 33134 US

Title: T () Delete
Name: BYRNE, THOMAS E
Address: 338 MINORCA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: SEC () Delete
Name: KRENZ, GINGER Y
Address: 338 MINORCA AVE
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KOHN, RONALD
Address: 338 MINORCA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Change () Addition
Name: BLACK, JAMES
Address: 338 MINORCA AVE
City-St-Zip: CORAL GABLES, FL 33134 US

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

Title: SEC (X) Change () Addition
Name: TELEK, VIKTORIA
Address: 338 MINORCA AVE
City-St-Zip: CORAL GABLES, FL 33134 US

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: NICK KALLERGIS

ED

07/19/2007

Electronic Signature of Signing Officer or Director

Date