

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752927

FILED
Jan 15, 2009
Secretary of State

Entity Name: SPAIN - U.S. CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

1221 BRICKELL AVE.
STE: 1540
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

1221 BRICKELL AVE.
STE: 1540
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 59-2043472 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ESTEVE, JOSE LUIS
1221 BRICKELL AVE.
STE: 1540
MIAMI, FL 33131 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: SD () Delete
Name: PESQUERA, CARLOS
Address: 1581 BRICKELL AVE. #1202
City-St-Zip: MIAMI, FL 33129

Title: PD () Delete
Name: ESTEVE, JOSE LUIS
Address: 4175 VENTURA AVE
City-St-Zip: COCONUT GROVE, FL 33133

Title: VPD () Delete
Name: OLLOQUI, RAFAEL
Address: 1432 BRICKELL AVE
City-St-Zip: MIAMI, FL 33131

Title: 2VPD () Delete
Name: VEGA SEOANE, IGNACIO
Address: 1221 BRICKELL AVE #1540
City-St-Zip: MIAMI, FL 33131

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VPD (X) Change () Addition
Name: OLLOQUI, RAFAEL
Address: 2620 SW 27 AVENUE
City-St-Zip: MIAMI, FL 33133

Title: 2VPD (X) Change () Addition
Name: GONZALEZ, EMILIO
Address: 1221 BRICKELL AVE #1540
City-St-Zip: MIAMI, FL 33131

Title: TREA () Change (X) Addition
Name: VELAZQUEZ, RAY
Address: 1221 BRICKELL AVENUE #1540
City-St-Zip: MIAMI, FL 33131

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: JOSE LUIS ESTEVE

PD

01/15/2009

Electronic Signature of Signing Officer or Director

Date