2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 8:00 am
Secretary of State
03-03-2006 90113 010 ****61.25

DOCUMENT # 755002

1. Entity Name
MIAMI CHAPTER OF THE AMERICAN INSTITUTE OF ARCHITECTS, INC.

Principal Place of Business	Mailing Address
275 UNIVERISYT DR CORAL GABLES, FL 33141	275 UNIVERISYT DR CORAL GABLES, FL 33141

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01132006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-6151172 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BRAZLAVSKY, MIJEL
275 UNIVERISYT DR
MIAMI BEACH, FL 33141

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD SOLERA, LOURDE 2780 SOUTHWEST DOUGLAS ROAD SUITE 308 MIAMI, FL 33133	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JORGE KUPPERMAN P.D 620 W DILIDO DRIVE MIAMI BEACH, FL 33139	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD GURRI, DAPHNE 801 MONTERREY ST. #205A CORAL GABLES, FL 33134	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD KERWIN, MICHAEL 800 DOUGLAS ENT. NORTH TOWER STE. 800 CORAL GABLES, FL 33134	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	KRICKET. SNOW. VPD. ZYSCOVICH ARCHITECT 1100 N. BISCAYNE BLVD 27 FLOOR MIAMI, FL 33132	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD KUPPERMAN, JORGE 620 W DILIDO DRIVE MIAMI BEACH, FL 33139	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BERNARD HOROVITZ. BERMELLO AJAMIL 2601 BAYSHORE DRIVE 10TH FLOOR MIAMI FL 33136	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD DIAZ-YABOR, MARTIN 12124 SW 131 AVE MIAMI, FL 33186	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MARTIN DIAZ-YABOR 12124 SW 131 AVE. MIAMI, FL 33186	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KERWIN, MICHAEL 800 DOUGLAS ENTRANCE N TOWER #202 CORAL GABLES, FL 33134	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JOHN FORBES SDD. 456 PONCE DE LEON BLVD #10 CORAL GABLES, FL 33146	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ MARTIN DIAZ-YABOR VP 02/27/06 3054487488
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #