## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#757220** 

FILED Feb 17, 2006 Secretary of State

Entity Name: THE FOUR AMBASSADORS MASTER ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

825 BRICKELL BAY DRIVE SUITE 250 MIAMI, FL 33131

**Current Mailing Address: New Mailing Address:** 

825 BRICKELL BAY DRIVE SUITE 250 MIAMI, FL 33131 US

FEI Number: 59-2109276 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALWINE, ROBERT J. ALWINE, ROBERT J.

825 BRICKELL BAY DRIVE, SUTIE 250 825 BRICKELL BAY DRIVE, SUITE 250

MIAMI, FL 33131 US MIAMI, FL 33131 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: ROBERT J. ALWINE 02/17/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

BURDAK, DANIEL Name: Name: 825 BRICKELL BAY DRIVE, SUTIE 250 Address: Address:

City-St-Zip: MIAMI, FL City-St-Zip:

Title: Title: (X) Change ( ) Addition ( ) Delete

CHOMAT, JORGE R. Name: CHOMAT, JORGE R. Name: Address: 825 BRICKELL BAY DRIVE, SUTIE 250 Address:

825 BRICKELL BAY DRIVE, SUTIE 1750

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL

Title: SO () Delete Title: (X) Change ( ) Addition MENA, EMILIO G MENA, EMILIO G Name: Name:

801 S. BAYSHORE DR. BOX 5 801 S. BAYSHORE DR. BOX 5 Address: Address:

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL

(X) Change ( ) Addition Title: VPD () Delete Title: SD

Name: PRADA, ALEXANDER Name: PRADA, ALEXANDER 825 BRICKELL BAY DRIVE, SUTIE 250 825 BRICKELL BAY DRIVE, SUTIE 250 Address: Address:

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL

Title: VPD () Delete Title: ( ) Change (X) Addition

BARROSO, JOHN Name: Name:

801 BRICKELL BAY DRIVE, SUITE 470 Address: Address:

City-St-Zip: City-St-Zip: MIAMI, FL 33131

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: DANIEL S. BURDAK PD 02/17/2006