

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757220

FILED
Feb 12, 2008
Secretary of State

Entity Name: THE FOUR AMBASSADORS MASTER ASSOCIATION, INC.

Current Principal Place of Business:

825 BRICKELL BAY DRIVE
SUITE 250
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

825 BRICKELL BAY DRIVE
SUITE 250
MIAMI, FL 33131 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

ALWINE, ROBERT J.
825 BRICKELL BAY DRIVE, SUITE 250
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: PD () Delete
Name: BURDAK, DANIEL
Address: 825 BRICKELL BAY DRIVE, SUTIE 250
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: CHOMAT, JORGE R.
Address: 825 BRICKELL BAY DRIVE, SUTIE 1750
City-St-Zip: MIAMI, FL

Title: TD () Delete
Name: NAPOLES, MARIA
Address: 825 BRICKELL BAY DRIVE. SUITE 250
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: PRADA, ALEXANDER
Address: 825 BRICKELL BAY DRIVE, SUTIE 250
City-St-Zip: MIAMI, FL

Title: SD (X) Delete
Name: BARROSO, JOHN
Address: 801 BRICKELL BAY DRIVE, SUITE 470
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: PRADA, ALEXANDER
Address: 825 BRICKELL BAY DRIVE. SUITE 250
City-St-Zip: MIAMI, FL

Title: SD (X) Change () Addition
Name: RUSSOWSKY, RUBENS
Address: 825 BRICKELL BAY DRIVE, SUTIE 250
City-St-Zip: MIAMI, FL

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

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: DANIEL S. BURDAK

PRES

02/12/2008

Electronic Signature of Signing Officer or Director

Date