

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760815

FILED  
Apr 24, 2012  
Secretary of State

**Entity Name:** BRAZILIAN-AMERICAN CHAMBER OF COMMERCE OF FLORIDA, INC.

**Current Principal Place of Business:**

501 BRICKELL KEY DRIVE  
SUITE 300  
MIAMI, FL 33131 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 310038  
MIAMI, FL 33231 US

**New Mailing Address:**

FEI Number: 59-2140671

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SKOLA, THOMAS J.  
501 BRICKELL KEY DRIVE  
SUITE 300  
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: D  
Name: SKOLA, THOMAS J  
Address: 501 BRICKELL KEY DRIVE - SUITE 300  
City-St-Zip: MIAMI, FL 33131

Title: TD  
Name: SANTOS, EDUARDO C  
Address: 801 BRICKELL AVE., SUITE 1300  
City-St-Zip: MIAMI, FL 33131

Title: P  
Name: CLAUDIO, CURY  
Address: 8405 NW 53RD. STREET - SUITE A100  
City-St-Zip: MIAMI, FL 33166

Title: D  
Name: BLANCO-REYES, MARILYN  
Address: 701 WATERFORD WAY, SUITE 1000  
City-St-Zip: MIAMI, FL 33126

Title: D  
Name: SCAFF, RENATO  
Address: 355 ALHAMBRA CIRCLE - SUITE 1550  
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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 all other like empowered.

SIGNATURE: THOMAS J. SKOLA

D

04/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date