

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 06, 2009
Secretary of State

DOCUMENT# 766151

Entity Name: MIAMI CHAPTER OF CONSTRUCTION SPECIFICATIONS INSTITUTE, INC.**Current Principal Place of Business:**6401 SW 87 AVENUE
109
MIAMI, FL 33173 US**New Principal Place of Business:****Current Mailing Address:**6401 SW 87 AVENUE
109
MIAMI, FL 33173 US**New Mailing Address:****FEI Number:** 59-2797273 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**FORS, LUIS
6401 SW 87 AVENUE
109
MIAMI, FL 33173 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:** P () Delete
Name: LEY, HUGO
Address: 13486 SW 12 LANE
City-St-Zip: MIAMI, FL 39402**Title:** T () Delete
Name: LEISECA, REMBERTO
Address: 6528 W 3 CT
City-St-Zip: HIALEAH, FL 33012**Title:** S () Delete
Name: SCHAFMEISTER, CAROLE
Address: 13334 SW 26 ST
City-St-Zip: MIRAMAR, FL 33027**Title:** D () Delete
Name: MILLER, JOSEPH
Address: 2400 DEER CREEK COUNTY BLVD - #705
City-St-Zip: DEERFIELD BEACH, FL 33442**Title:** D () Delete
Name: GARCIA, ALICIA
Address: 800 DOUGLAS ENTRANCE - 2ND FLOOR
City-St-Zip: CORAL GABLES, FL 33134**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** IPP (X) Change () Addition
Name: LEY, HUGO
Address: 13486 SW 12 LANE
City-St-Zip: MIAMI, FL 39402**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** S (X) Change () Addition
Name: ALVAREZ, MARLENE
Address: 12791 NW 11 STREET
City-St-Zip: MIAMI, FL 33182**Title:** P (X) Change () Addition
Name: COHAN, LARRY
Address: 4942 S LEJEUNE ROAD - SUITE 200
City-St-Zip: CORAL GABLES, FL 33146**Title:** VP (X) Change () Addition
Name: FORS, LUIS A
Address: 6401 SW 87 AVENUE - SUITE 109
City-St-Zip: MIAMI, FL 33173

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: REMBERTO J LEISECA

T

08/06/2009

Electronic Signature of Signing Officer or Director

Date