


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90423 022 ****61.25

DOCUMENT # 767150 1. Entity Name MIAMI ASSOCIATION OF COMMUNICATION SPECIALISTS, INC.					
Principal Place of Business 2520 SW 22 CT #2-140 MIAMI, FL 33145			Mailing Address 2520 SW 22 CT #2-140 MIAMI, FL 33145		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1834674	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SANTA, DAPHNE 16425 BRIDGE END ROAD MIAMI LAKES, FL 33014				Name Torres, Laura Street Address (P.O. Box Number is Not Acceptable) 3411 Indian Creek Drive #1203 City Miami Beach FL Zip Code 33140	
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 <i>Laura Jones - Laura Torres (Treasurer)</i> 4/21/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	P SANTA, DAPHNE 16425 BRIDGE END RD MIAMI LAKES, FL 33014	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Concetta Bruno, Concetta 1000 Quayside Terr #1605 Miami, FL 33138	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PP ARIAS, CARMEN 7021 SW 112 COURT MIAMI, FL 33173	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Past President Santa, Daphne 16425 Bridge End Road Miami Lakes, FL 33014	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PE BRUNO, TINA 1000 QUAYSIDE TERR #1605 MIAMI, FL 33138	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Elect Jacir, Edith 1046 Waterside Circle Weston, FL 33327	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP EVANS, RACHEL 5805 SW 61 STREET MIAMI, FL 33143	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Evans, Rachel 16218 SW 92nd Avenue Miami, FL 33157	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JACIR, EDITH 4364 MAHOGANY RIDGE DR WESTON, FL 33331	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Lucy Lopes 814 Pizarro Street Coral Gables, FL 33134	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GREENBERG, IRIT 1915 BRICKELL AVE #C-607 MIAMI, FL 33129	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Torres, Laura 3411 Indian Creek Drive #1203 Miami Beach, FL 33140	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Laura Jones - Laura Torres / Treasurer</i> 4/21/04 (305) 672-7846 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					