

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003142

FILED
Aug 19, 2005
Secretary of State

Entity Name: PUERTO RICAN CHAMBER OF COMMERCE FOR BROWARD COUNTY, INC.

Current Principal Place of Business:

7104 PEMBROKE RD.
MIRAMAR, FL 33023

New Principal Place of Business:

7321 TAYLOR ST.
HOLLYWOOD, FL 33024

Current Mailing Address:

7321 TAYLOR STREET
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: 65-1009132 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

NIEVES, FRANK
7321 TAYLOR STREET
HOLLYWOOD, FL 33024 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NIEVES, FRANK
Address: 7321 TAYLOR STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: VPD () Delete
Name: SANTOS, ARROYO
Address: 16735 88TH ROAD NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANK NIEVES

PD

08/19/2005

Electronic Signature of Signing Officer or Director

Date