

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005145

FILED
Jan 10, 2006
Secretary of State

Entity Name: MIAMI BUSINESS FORUM, INC.

Current Principal Place of Business:

150 W FLAGLER #1820
SUITE 1820
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

150 W FLAGLER #1820
SUITE 1820
MIAMI, FL 33130

New Mailing Address:

FEI Number: 65-1043129

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD, #221E
PALM BEACH GARDENS, FL 33410 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 () Delete
Name: CODINO, ARMANDO P
Address: 355 ALHAMBRA #900
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: LACHER, JOE
Address: 150 W FLAGLER #1901
City-St-Zip: MIAMI, FL 33155

Title: D () Delete
Name: ARTECONA, MARIO
Address: 6525 SW 55 LANE
City-St-Zip: MIAMI, FL 33155

Title: D () Delete
Name: HERNANDEZ-TORANO, JORGE
Address: 701 BRIKELL #3000
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CODINA, ARMANDO P
Address: 355 ALHAMBRA #900
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change () Addition
Name: ARSHT, ADRIENNE
Address: 2720 CORAL WAY
City-St-Zip: MIAMI, FL 33145

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 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: MARIO J ARTECONA

D

01/10/2006

Electronic Signature of Signing Officer or Director

Date