# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005145

**Entity Name:** MIAMI BUSINESS FORUM, INC.

| **Current Principal Place of Business:** | **New Principal Place of Business:** |
|---|---|
| 150 W FLAGLER #1820<br>SUITE 1820<br>MIAMI, FL  33130 | |

| **Current Mailing Address:** | **New Mailing Address:** |
|---|---|
| 150 W FLAGLER #1820<br>SUITE 1820<br>MIAMI, FL  33130 | |

FEI Number: 65-1043129          FEI Number Applied For ( )          FEI Number Not Applicable ( )          Certificate of Status Desired ( )

| **Name and Address of Current Registered Agent:** | **Name and Address of New Registered Agent:** |
|---|---|
| CORPORATE CREATIONS NETWORK INC.<br>11380 PROSPERITY FARMS ROAD, #221E<br>PALM BEACH GARDENS, FL  33410     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:

| | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
|---|---|---|---|
| Title: | D          ( ) Delete | Title: | ( ) Change ( ) Addition |
| Name: | CODINA, ARMANDO P | Name: | |
| Address: | 355 ALHAMBRA #900 | Address: | |
| City-St-Zip: | CORAL GABLES, FL  33134 | City-St-Zip: | |
| Title: | D          ( ) Delete | Title: | ( ) Change ( ) Addition |
| Name: | ARSHT, ADRIENNE | Name: | |
| Address: | 2720 CORAL WAY | Address: | |
| City-St-Zip: | MIAMI, FL  33145 | City-St-Zip: | |
| Title: | D          ( ) Delete | Title: | ( ) Change ( ) Addition |
| Name: | ARTECONA, MARIO | Name: | |
| Address: | 6525 SW 55 LANE | Address: | |
| City-St-Zip: | MIAMI, FL  33155 | City-St-Zip: | |
| Title: | D          ( ) Delete | Title: | ( ) Change ( ) Addition |
| Name: | HERNANDEZ-TORANO, JORGE | Name: | |
| Address: | 701 BRIKELL #3000 | Address: | |
| City-St-Zip: | MIAMI, FL  33135 | City-St-Zip: | |

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:  MARIO J ARTECONA                                    DIR                    01/16/2008

Electronic Signature of Signing Officer or Director                                    Date