DOCUMENT # N00623

DOCUMENT # NO0623 1. Entity Name THE GREATER NORTH MIAMI CHAMBER OF COMMERCE, INC					FILED Jan 13, 2001 8:00 am			
ine Gr	SEATER NUMBER WILAWIT CHAP	VIDEN OF COIVIIVIENCE	, INC			Secretary of	of Sta	te
Principal Place of Business Mailing Address					01-13-2001 90066 020 ****61.25			
13100 WEST DIXIE HIGHWAY NORTH MIAMI FL 33161-4131		13100 WEST DIXIE HIGHWAY NORTH MIAMI FL 33161-4131						
2. Principal F	Place of Business	3. Mailing Address						
Suite Apt # etc		Suite Apt # oto	Suite, Apt. #, etc.		1 (88)	DO NOT WRITE IN THIS		(\$)) 216() (59)
Suite, Apt. #, etc. Suite, Apt. #, etc.					DO NOT WATE IN THE) SI ACL		
City & State City & State		City & State			4. FEI Numb	59-0642080	— — —	pplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate	of Status Desired	\$8.75 Add	ditional
	6. Name and Address of Current	Registered Agent		1	7. Name and	Address of New Registered	Agent.	
. · · · ·		·	Name					
DOROTHY D VALENTINE			Street A	Address (F	P.O. Box Numbe	er is Not Acceptable)		
13100 W DIXIE HWY NORTH MIAMI FL 33161						1		
NORTH	MANIFE 33 TO I		City			FI	L Zip Cod	e .
SIGNATURE .	Registered Agent signat	ture required	when reinstating)	DATE				
FILE NOW: 9. Election Campaign Trust Fund Contrib			- 40100 may 00		Make Check Payable to Department of State			
10.	OFFICERS AND DII		11.	A	DDITIONS/CH	ANGES TO OFFICERS AND D		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GALVIN, SCOTT 13506 NE 24TH CT N MIAMI FL 33181	Delete .	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD		Cobo N.W. 7 th Avenu Miami, Fl. 3316		Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GALPERN, JOEL 1035 NE 125 ST STE 320 NORTH MIAMI-FL:33161	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	- ي م			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BLANCA COBO 13490 NW 7TH AVE NORTH MIAMI FL 33161	X Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP	Ron We 7875 W	lsandt est Commercial : uderdale, Fl. 3		Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WHEELER, DEBRA 160 NW 170 ST N. MIAMI BEACH FL 33169	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD	12700	F. Keys, Fsq. Biscayne Blvd.# Miami, Fl. 3316		Addition
TITLE NAME STREET AUDRESS CITY-ST-ZIP	TV TOR WITE DESCRIPTION	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	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:

SIGNATURE REQUIRED Darachy SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

891-7811 bice