

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001678

FILED
May 01, 2005
Secretary of State

Entity Name: DOMINICAN INTERNATIONAL CHAMBER OF COMMERCE OF FLORIDA, INC.

Current Principal Place of Business:

135 S W 22ND AVENUE
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

135 S W 22ND AVENUE
MIAMI, FL 33135

New Mailing Address:

FEI Number: 65-1085013 **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:

SEGURA, YUNIS
135 S W 22ND AVENUE
MIAMI, FL 33135 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: SEGURA, YUNIS
Address: 135 S W 22ND AVENUE
City-St-Zip: MIAMI, FL 33135

Title: VD () Delete
Name: SANCHEZ, JUAN
Address: 135 S W 22ND AVENUE
City-St-Zip: MIAMI, FL 33135

Title: TD () Delete
Name: MARTINEZ, MILVIO
Address: 135 S W 22ND AVENUE
City-St-Zip: MIAMI, FL 33135

Title: SD () Delete
Name: SANCHEZ, EDUARDO
Address: 135 S W 22ND AVENUE
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: YUNIS SEGURA

PD

05/01/2005

Electronic Signature of Signing Officer or Director

Date