

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007515

FILED
Apr 21, 2004
Secretary of State**Entity Name:** BARBADOS USA CHAMBER OF COMMERCE, INC.**Current Principal Place of Business:**150 ALHAMBRA CIRCLE
SUITE #1000
CORAL GABLES, FL 33134**New Principal Place of Business:****Current Mailing Address:**150 ALHAMBRA CIRCLE
SUITE #1000
CORAL GABLES, FL 33134**New Mailing Address:****FEI Number:** 65-1148740**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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:** PD () Delete
Name: NICHOLLS, RONALD
Address: 150 ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33134**Title:** SD () Delete
Name: DRAKES, HEATHER
Address: 150 ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33134**Title:** TD () Delete
Name: BELGRAVE, DARRELL
Address: 150 ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33134**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: WILLIAMS, DWAYNE
Address: 150 ALHAMBRA CIRCLE, #1000
City-St-Zip: CORAL GABLES, FL 33134**Title:** SD (X) Change () Addition
Name: DRAKES, HEATHER
Address: 150 ALHAMBRA CIRCLE, #1000
City-St-Zip: CORAL GABLES, FL 33134**Title:** TD (X) Change () Addition
Name: BELGRAVE, DARRELL
Address: 150 ALHAMBRA CIRCLE, #1000
City-St-Zip: CORAL GABLES, FL 33134

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: DWAYNE WILLIAMS

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04/21/2004

Electronic Signature of Signing Officer or Director

Date