

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009365

**FILED**  
**Apr 07, 2005**  
**Secretary of State**

**Entity Name:** COLOMBIA CHAMBER OF COMMERCE OF BROWARD COUNTY, INC.

**Current Principal Place of Business:**

6289 W SUNRISE BLVD STE #258  
SUNRISE, FL 33313

**New Principal Place of Business:**

6289 W SUNRISE BLVD STE  
258  
SUNRISE, FL 33313

**Current Mailing Address:**

6289 W SUNRISE BLVD STE #258  
SUNRISE, FL 33313

**New Mailing Address:**

6289 W SUNRISE BLVD STE  
258  
SUNRISE, FL 33313

**FEI Number:** 54-2084533

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ROCA, JAMES S  
5070 SW 24 ST  
FT LAUDERDALE, FL 33317 US

**Name and Address of New Registered Agent:**

SOTO, JAMES  
5070 SW 24 ST  
FT LAUDERDALE, FL 33317 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:** JAMES SOTO

04/07/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** SOTO, JAMES S  
**Address:** 5070 SW 24 ST  
**City-St-Zip:** FT LAUDERDALE, FL 33317

**Title:** T ( ) Delete  
**Name:** MENDOZA, ALFREDO  
**Address:** 3570 NW 37 ST  
**City-St-Zip:** CORAL SPRINGS, FL 33065

**Title:** S ( ) Delete  
**Name:** RUIZ, CARLOS  
**Address:** 1018 N.E. 7 ST  
**City-St-Zip:** HALLANDALE, FL 33309

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** P (X) Change ( ) Addition  
**Name:** SOTO, JAMES S  
**Address:** 5070 SW 24 ST  
**City-St-Zip:** FT LAUDERDALE, FL 33317

**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:** JAMES SOTO

P

04/07/2005

Electronic Signature of Signing Officer or Director

Date