

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N03000002924

Entity Name: BREAKFAST CLUB MIAMI INC.

Current Principal Place of Business:

780 NE 69TH STREET
SUITE 1809
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

780 NE 69TH STREET
SUITE 1809
MIAMI, FL 33138

New Mailing Address:

FEI Number: 86-1057455 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAPOCHNIK, ANDRES
780 NE 69TH STREET
SUITE 1809
MIAMI, FL 33138 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: VICE () Delete
Name: PUGLIESE, GERMAN
Address: 169 E FLAGLER ST. STE. 1534
City-St-Zip: MIAMI, FL 33131

Title: DIR () Delete
Name: NICENBOIM, JOSE
Address: 169 E FLAGLER ST. STE. 1534
City-St-Zip: MIAMI, FL 33131

Title: DIR () Delete
Name: GOMEZ-GEZ, MARIA CLAUDIA
Address: 169 E FLAGLER ST. STE. 1534
City-St-Zip: MIAMI, FL 33131

Title: DIR () Delete
Name: GOSPONINOFF, VICTOR
Address: 9100 S. DADE BLVD. STE. 104
City-St-Zip: MIAMI, FL 33156

Title: DIR () Delete
Name: ROTHOLC, ALEJANDRO
Address: 201 ALHAMBRA CIRCLE STE. 510
City-St-Zip: CORAL GABLES, FL 33134

Title: CHAR () Delete
Name: SAPOCHNIK, ANDRES
Address: 780 NE 69TH STREET STE. 1809
City-St-Zip: MIAMI, FL 33138

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:

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 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: ANDRES SAPOCHNIK

Electronic Signature of Signing Officer or Director

CHAR

04/29/2008

_____ Date