

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004790

FILED  
Apr 10, 2008  
Secretary of State

**Entity Name:** HARVARD BUSINESS SCHOOL CLUB OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

2050 CORAL WAY STE 501  
MIAMI, FL 33145

**New Principal Place of Business:**

**Current Mailing Address:**

2050 CORAL WAY STE 501  
MIAMI, FL 33145

**New Mailing Address:**

**FEI Number:** 65-1133160

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROMM, MICHAEL  
2189 SE 9 STREET  
POMPANO BEACH, FL 33062 US

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

KAMONS, DAVID  
700 BRICKELL AV  
MIAMI, FL 33131 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: DAVID KAMONS

04/10/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KERN, DANIEL  
Address: 2050 CORAL WAY, SUITE 501  
City-St-Zip: MIAMI, FL 33145

Title: SD ( ) Delete  
Name: CARVALHO, GABRIELA  
Address: 1541 BRICKELL AVENUE, APT 509 C  
City-St-Zip: MIAMI, FL 33129

Title: TD ( ) Delete  
Name: SHABATAI, JOSEPH  
Address: 7800 RED ROAD, # 330  
City-St-Zip: MIAMI, FL 33143

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

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

Title: SD (X) Change ( ) Addition  
Name: KAMONS, DAVID  
Address: 700 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131

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: DANIEL KERN

PD

04/10/2008

Electronic Signature of Signing Officer or Director

Date