2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009590

FILED Mar 22, 2006 Secretary of State

Entity Name: PUERTO RICAN CHAMBER OF COMMERCE OF PALM BEACH COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 17256

WEST PALM BEACH, FL 33416 US

Current Mailing Address: New Mailing Address:

P.O. BOX 17256

WEST PALM BEACH, FL 33416 US

FEI Number: 20-3326148 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RIOS, MIGUEL A RIOS, MIGUEL (MIKE) A 1121 SUMMIT PL CIR 1121 SUMMIT PL CIR

WEST PALM BEACH, FL 33415 US WEST PALM BEACH, FL 33415 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: MIGUEL (MIKE) A RIOS 03/22/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PCEO (X) Change () Addition

 Name:
 RIOS, MIGUEL A

 Address:
 P.O. BOX 17256

 Name:
 RIOS, MIGUEL A

 Address:
 P.O. BOX 17256

City-St-Zip: WEST PALM BEACH, FL 33416 US City-St-Zip: WEST PALM BEACH, FL 33416 US

Title: DIR () Delete Title: DIR (X) Change () Addition

Name: ROSA, FRED Name: CORDERO, DR. EDWIN

 Address:
 P.O. BOX 17256
 Address:
 P.O. BOX 17256

 City-St-Zip:
 WEST PALM BEACH, FL 33416 US
 City-St-Zip:
 WEST PALM BEACH, FL 33416 US

Title: DIR () Delete Title: DIR (X) Change () Addition

Name: SERGIO, CASAINE Name: NAZARIO, DR. LESLIE

Address: P.O. BOX 17256 Address: P.O. BOX 17256

City-St-Zip: WEST PALM BEACH, FL 33416 City-St-Zip: WEST PALM BEACH, FL 33416

Title: DIR () Delete Title: DIR (X) Change () Addition

 Name:
 MORALES, DANNY
 Name:
 FIGUEROA, ANGEL

 Address:
 P.O. BOX 17256
 Address:
 P.O. BOX 17256

City-St-Zip: WEST PALM BEACH, FL 33416 US City-St-Zip: WEST PALM BEACH, FL 33416 US

Title: DIR (X) Delete Title: () Change () Addition Name: HERNANDEZ, VICTOR Name:

 Address:
 P.O. BOX 17256
 Address:

 City-St-Zip:
 WES PALM BEACH, FL 33416 US
 City-St-Zip:

Title: DIR (X) Delete Title: () Change () Addition

 Name:
 DAVILA, LOU
 Name:
 Address:
 Address:
 Address:

Address: P.O. BOX 17256 Address:

City-St-Zip: WEST PALM BEACH, FL 33416 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MIGUEL A RIOS PCEO 03/22/2006