

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 20, 2008
Secretary of State

DOCUMENT# N03000010408

Entity Name: AMERICAN CHAMBER OF COMMERCE, INC.**Current Principal Place of Business:**1835 SW 102 CT
MIAMI, FL 33165**New Principal Place of Business:**5661 SW 129 PL
MIAMI, FL 33183**Current Mailing Address:**1835 SW 102 CT
MIAMI, FL 33165**New Mailing Address:**5661 SW 129 PL
MIAMI, FL 33183**FEI Number:** 61-1460511**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**HAYES, JOSEFINA C RA
1835 SW 102 CT
MIAMI, FL 33165 US**Name and Address of New Registered Agent:**HAYES, KRISTINA J MS.
5661 SW 129 PL
MIAMI, FL 33183 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: JOSEFINA C. HAYES

05/20/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HAYES, JOSEFINA C PRE/CEO
Address: 1835 SW 102 CT
City-St-Zip: MIAMI, FL 33165 US

Title: DIR () Delete
Name: HAYES, JOSEFINA C SRVP
Address: 1835 SW 102 CT
City-St-Zip: MIAMI, FL 33165 US

Title: SRVP () Delete
Name: ARANGO, CONSUELO SRVP
Address: 5661 SW 129 PLACE
City-St-Zip: MIAMI, FL 33183 US

Title: JRVP (X) Delete
Name: DORLISKA, MELENEZ
Address: 13320 SW 119 STREET
City-St-Zip: MIAMI, FL 33186 US

Title: SEC (X) Delete
Name: HAYES, JOSEFINA C
Address: 1835 SW 102 CT
City-St-Zip: MIAMI, FL 33165 US

Title: TRES (X) Delete
Name: HAYES, JOSEFINA
Address: 1835 SW 102 CT
City-St-Zip: MIAMI, FL 33165 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HAYES, KRISTINA J MS.
Address: 5661 SW 129 PL
City-St-Zip: MIAMI, FL 33183 US

Title: SRVP (X) Change () Addition
Name: ARANGO, CONSUELO MRS.
Address: 5661 SW 129 PL
City-St-Zip: MIAMI, FL 33183 US

Title: JRVP (X) Change () Addition
Name: MELENEZ, DORLISKA MRS.
Address: 13320 SW 119 STREET
City-St-Zip: MIAMI, FL 33183 US

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: KRISTINA J. HAYES

PRES

05/20/2008

Electronic Signature of Signing Officer or Director

Date