

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010408

FILED
Apr 14, 2009
Secretary of State

Entity Name: AMERICAN CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

5661 SW 129 PL
MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

5661 SW 129 PL
MIAMI, FL 33183

New Mailing Address:

FEI Number: 61-1460511

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JOSEFINA HAYES

PRES

04/14/2009

Electronic Signature of Signing Officer or Director

_____ Date