2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001333

FILED May 10, 2005 Secretary of State

Entity Name: OPA LOCKA CHAMBER OF COMMERCE INC.

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

1300 NW 167 ST

STE 1

MIAMI GARDENS, FL 33169 US

Current Mailing Address: New Mailing Address:

1300 NW 167 ST

STE 1

MIAMI GARDENS, FL 33169 US

FEI Number: 20-0690699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CUSON, R. TERRY KOTZEN, MATHEW C ESQ.

1300 NW 167 ST 1300 NW 167 ST STE 1 STE 1

MIAMI GARDENS, FL 33169 US MIAMI GARDENS, FL 33169 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: MATHEW C. KOTZEN, ESQ 05/10/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PRES (X) Change () Addition

 Name:
 CUSON, R TERRY
 Name:
 RANSFORD, JOEL M

 Address:
 1300 NW 167 ST SUITE 1
 Address:
 1300 NW 167 ST SUITE 1

 City-St-Zip:
 MIAMI GARDENS, FL 33169 US
 City-St-Zip:
 MIAMI GARDENS, FL 33169 US

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

 Name:
 BRYAN, HUGH
 Name:

 Address:
 12840 NW 27 AVE
 Address:

 City-St-Zip:
 MIAMI, FL 33054 US
 City-St-Zip:

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

 Name:
 ESPINOSA, OLGA
 Name:

 Address:
 111 NW 1 ST
 Address:

 City-St-Zip:
 MIAMI, FL 33128 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOEL M. RANSFORD PRES 05/10/2005