

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001333

FILED
May 01, 2007
Secretary of State

Entity Name: OPA LOCKA CHAMBER OF COMMERCE INC.

Current Principal Place of Business:

1300 NW 167 ST
STE 1
MIAMI GARDENS, FL 33169 US

New Principal Place of Business:

Current Mailing Address:

1300 NW 167 ST
STE 1
MIAMI GARDENS, FL 33169 US

New Mailing Address:

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

NORTH DADE REGIONAL CHAMBER
1300 NW 167 ST
STE 1
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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CHR () Delete
Name: BRYAN, HUGH M
Address: 1300 NW 167 ST SUITE 1
City-St-Zip: MIAMI GARDENS, FL 33169 US

Title: DIR () Delete
Name: MCCARTNEY, SAMUEL C
Address: 1300 N.W. 167TH STREET, SUITE 1
City-St-Zip: MIAMI GARDENS, FL 33169 US

Title: TRS () Delete
Name: LINDGREN, KEITH
Address: 1300 N.W. 167TH STREET, SUITE 1
City-St-Zip: MIAMI GARDENS, FL 33169 US

Title: CFO () Delete
Name: RANSFORD, JOEL M
Address: 1300 N.W. 167TH STREET, SUITE 1
City-St-Zip: MIAMI GARDENS, FL 33169

Title: DIR () Delete
Name: WEBB, WILLIAM C
Address: 1300 NW 167TH STREET, SUITE 1
City-St-Zip: MIAMI GARDENS, FL 33169

Title: DIR () Delete
Name: DONATH, JONAH J
Address: 1300 NW 167TH STREET, SUITE 1
City-St-Zip: MIAMI GARDENS, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOEL M RANSFORD

CFO

05/01/2007

Electronic Signature of Signing Officer or Director

Date