



2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90449 050 ****61.25

DOCUMENT # N04000001543 1. Entity Name BISCAYNE CORRIDOR CHAMBER OF COMMERCE, INC.					
Principal Place of Business 1300 NW 167TH ST SUITE 1 MIAMI GARDENS, FL 33169 US				Mailing Address 5981 N.E. SIXTH AVENUE MIAMI, FL 33137 US	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 1300 NW 167th St.		<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">50015125</div>  <div style="margin-top: 10px;"> 04192006 Chg-NP CR2E037 (11/05) </div>	
City & State Miami Gardens, FL		Suite, Apt. #, etc. Suite 1			
Zip 33169		Country US			
4. FEI Number 59-3269801		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent STEVEN K. BAIRD, P.A. 5981 N.E. SIXTH AVENUE MIAMI, FL 33137				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WHITESIDE, PATRICK 780 NE 69TH STREET MIAMI, FL 33138		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2000 Ponce de Leon Blvd., 6th floor Coral Gables, FL 33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MEYER, JOHN 805 NE 72ND TERRACE MIAMI, FL 33138		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BAIRD, STEVEN K 5981 NE 6TH AVE MIAMI, FL 33137		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D Liliane Smatt 7935 NW 2nd St. Miami FL 33126	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT GORDON, MARC 1648 NOCATEE DRIVE MIAMI, FL 33133		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D Bill Traurig 780 NE 69th St. #1709 Miami FL 33138	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete ATLAS, RUSSELL 02006 BISCAYNE BLVD MIAMI, FL 33137		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DANA, HARVEY 12000 BISCAYNE BLVD MIAMI, FL 33181		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Steven K. Baird, Secretary</u> Steven K. Baird 4/19/06 305-757-6755 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

STEVEN K. BAIRD, P.A.

ATTORNEY AT LAW

ATTACHMENT

50015125
1040000015-4-3

5981 NE 6th Avenue
Miami, Florida 33137

Tel: (305) 757 6755

Fax: (305) 757 6756

SKBPA@CS.com

April 21, 2006

Via Regular Mail

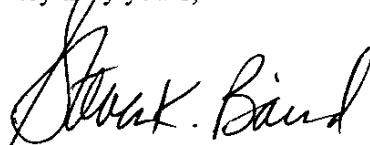
Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Biscayne Corridor Chamber of Commerce, Inc.

Ladies and Gentlemen:

Enclosed is the 2006 Not-for-Profit Corporation annual report for the above-referenced client. Also enclosed is a check in the amount of \$61.25 for the filing fee.

Very truly yours,



Steven K. Baird

SKB:mjc
encl.
cc: CSI