

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002945

FILED
Apr 22, 2005
Secretary of State

Entity Name: MIAMI MOTORCYCLE ASSOCIATION CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

7317 NW 56TH ST.
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

7317 NW 56TH ST.
MIAMI, FL 33166

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROMERO, ANGEL
7317 NW 56 ST.
MIAMI, FL 33166 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: PD () Delete
Name: ROMERO, ANGEL
Address: 7317 NW 56TH ST.
City-St-Zip: MIAMI, FL 33166

Title: SD () Delete
Name: ROMERO, MARITZA
Address: 7317 NW 56TH ST.
City-St-Zip: MIAMI, FL 33166

Title: TD () Delete
Name: ROMERO, ALBERTO
Address: 7317 NW 56TH ST.
City-St-Zip: MIAMI, FL 33166

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:

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: ANGEL ROMERO

PRES

04/22/2005

Electronic Signature of Signing Officer or Director

Date