

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009434

FILED
Jul 05, 2006
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF MEETINGS & EVENTS, INC.

Current Principal Place of Business:

600 NE 36 STREET
#1704
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

600 NE 36 STREET
#1704
MIAMI, FL 33137

New Mailing Address:

FEI Number: 56-2483335 **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:

ROSENTHAL, JUDY
600 NE 36 STREET
#1704
MIAMI, FL 33137 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: CPRD () Delete
Name: ROSENTHAL, JUDY
Address: 600 NE 36 STREET, #1704
City-St-Zip: MIAMI, FL 33137

Title: CPRD () Delete
Name: CITRON, BEVERLY
Address: 1833 MADISON STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: MD () Delete
Name: COLONGO, MARIE
Address: 7290 JACARANDA LANE
City-St-Zip: MIAMI LAKES, FL 33014

Title: SD () Delete
Name: HEARNS, JOAN
Address: 1009 N OCEAN BLVD. #510
City-St-Zip: POMPANO BEACH, FL 33062

Title: TD () Delete
Name: PROCACCINI, LARRY
Address: 1117A S. 21 AVENUE
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CPRD (X) Change () Addition
Name: CITRON, BEVERLY
Address: 2615 MC KINLEY STREET
City-St-Zip: HOLLYWOOD, FL 33020

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

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

Title: TD (X) Change () Addition
Name: PROCACCINI, LARRY
Address: 1117A S. 24 AVENUE
City-St-Zip: HOLLYWOOD, FL 33020

I hereby certify that the information supplied with this filing does not qualify for the 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: JUDY ROSENTHAL

MEMB

07/05/2006

Electronic Signature of Signing Officer or Director

Date