

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011818

FILED
Sep 05, 2006
Secretary of State

Entity Name: SURINAME AMERICAN CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

6303 BLUE LAGOON DRIVE
SUITE 325
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

6303 BLUE LAGOON DRIVE
SUITE 325
MIAMI, FL 33126

New Mailing Address:

FEI Number: 34-2027804 **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:

TJON, MARTIN
3811 SW 47TH AVE
SUITE 619
DAVIE, FL 33314 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: D () Delete
Name: TJON, MARTIN
Address: 3811 SW 47TH AVE., SUITE 619
City-St-Zip: DAVIE, FL 33314

Title: D () Delete
Name: VALIES, ROXANNE
Address: 9359 NW 49TH PLACE
City-St-Zip: SUNRISE, FL 33351

Title: D () Delete
Name: GOBARDHAN, SOERESH
Address: 5722 NW 50TH DR
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D () Delete
Name: LECKIE, ARNY
Address: P.O. BOX 432065
City-St-Zip: MIAMI, FL 33126

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:

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: MARTIN TJON

D

09/05/2006

Electronic Signature of Signing Officer or Director

Date