## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05673

FILED Apr 26, 2005 Secretary of State

Entity Name: SOUTH FLORIDA SECTION, MERCEDES BENZ CLUB OF AMERICA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1 S.E. 3 AVENUE, 11TH FLOOR 2121 SW 3 AVENUE MIAMI, FL 33131 MIAMI, FL 33129 **Current Mailing Address: New Mailing Address:** 2516 DESOTO BLVD. CORAL GABLES, FL 33134 US FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PAPPAS, MARIE 2516 DESOTO BLVD. CORAL GABLES, FL 33134 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete COHEN, JERRY ROBINSON, KEN Name: Name: 3000 WILLIAMS ISLAND DR., #1903 Address: 2881 NE33 CT. Address: City-St-Zip: NORTH MIAMI BEACH, FL 33160 City-St-Zip: FORT LAUDERDALE, FL 33306 Title: ( ) Delete Title: (X) Change ( ) Addition ROBINSON, KEN Name: GOMEZ, GABRIEL Name: Address: 2881 NE 33 CT. Address: 10748 NW 12 MANOR, #12 City-St-Zip: FORT LAUDERDALE, FL 33306 City-St-Zip: PLANTATION, FL 33322 Title: () Delete Title: () Change () Addition ROBINSON, TUNDE Name: Name: Address: 2881 NE 33 CT. Address: City-St-Zip: FORT LAUDERDALE, FL 33306 City-St-Zip: Title: ST ( ) Delete Title: () Change () Addition Name: PAPPAS, MARIE Name: 2516 DESOTO BLVD. Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: () Delete Title: () Change () Addition SHRAGO, MEL Name: Name: 3675 NORTH COUNTRY CLUB Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: () Delete Title: () Change () Addition ENGEL. HOWARD Name: Name: Address: 8235 SUNRISE LAKE BLVD. Address: SUNRISE, FL 33322 City-St-Zip: 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: MARIE PAPPAS ST 04/26/2005