2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010905

FILED Apr 15, 2009 Secretary of State

Entity Name: SWFLPUERTO RICANCHAMBER OF COMMERCEI INC.

Current Principal Place of Business: New Principal Place of Business: 3713WASHINGTON AVE 2302 CHRISTOPHER AVE N. LEHIGH ACRES, FL 33971 FT MYERS, FL 33916 **New Mailing Address: Current Mailing Address:** 3713WASHINGTON AVE P.O. BOX 2006 FT MYERS, FL 33902 FT MYERS, FL 33916 FEI Number: 01-0876382 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PEREZ, ROBERT PEREZ, ROBERT PRESIDE 2302 CHRISTOPHER AVE N. 3713WASHINGTON AVE LEHIGH ACRES, FL 33971 US FT MYERS, FL 33916 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: ROBERT PEREZ 04/15/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition PEREZ, ROBERT PEREZ, ROBERT Name: Name: 3713WASHINGTON AVE APT3 Address: 2302 CHRISTOPHER AVE Address: City-St-Zip: FT MYERS, FL 33916 US City-St-Zip: LEHIGH ACRES, FL 33971 US Title: CM () Delete Title: () Change () Addition RODRIGUEZ, ROBERT Name: Name: Address: 1826S.E. PORT ST LUCY BLVD Address: City-St-Zip: PORT ST LUCY, FL 34952 US City-St-Zip: Title: () Delete Title: (X) Change () Addition MARRERO, MARTA I MARRERO, MARTA I Name: Name: 3713WASHINGTON AVE APT3 Address: Address: 2302 CHRISTOPHER AVE City-St-Zip: FORT MYERS, FL 33916 US City-St-Zip: LEHIGH ACRES, FL 33971 US () Delete Title: Title: SECY (X) Change () Addition RODRIGUEZ, MIGUEL SR PATTERSON, VANESSA H Name: Name: 2158COLONIAL BLVD Address: Address: 23 NE 12TH COURT City-St-Zip: FORT MYERS, FL 33912 US City-St-Zip: CAPE CORAL, FL 33909 Title: (X) Delete Title: () Change () Addition CARDONA, VERONICA Name: Name: 4953SHERY ST Address: Address: FORT MYERS, FL 33905 US City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition MISAEL. MARRERO Name: Name: Address: 34 KINGSMAN CIR Address: FORT MYERS, FL 33905 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT PEREZ PRES 04/15/2009