2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# N07000005020

Entity Name: DOMINICAN AMERICAN NATIONAL CHAMBER OF COMMERCE OF BROWARD, INC.

Current Principal Place of Business:

6948 PINES BLVD
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

6948 PINES BLVD
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 26-0227800 **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:

TAMAREZ, MILEDYS
6948 PINES BLVD
PEMBROKE PINES, FL 33024 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: TAMAREZ, MILEDYS
Address: 6948 PINES BLVD
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VPD ( ) Delete
Name: PICHARDO, MANUEL
Address: 6675 PEMBROKE ROAD
City-St-Zip: PEMBROKE PINES, FL 33023

Title: TD ( ) Delete
Name: COLON, JUAN
Address: 1313 NORTH 58TH AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: SD ( ) Delete
Name: CASTILLO, PEDRO
Address: 310 SW 134 AVENUE
City-St-Zip: MIAMI, FL 33184

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 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: MILEDYS TAMAREZ P 05/01/2008

Electronic Signature of Signing Officer or Director — Date