

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007146

FILED  
Sep 02, 2009  
Secretary of State

**Entity Name:** CENTRAL AMERICA FREE TRADE AGREEMENT AND DOMINICAN REPUBLIC CHAMBERS OF COMMERCE ASSOCIATION OF FLORIDA, INC.

**Current Principal Place of Business:**

10305 NW 41 STREET  
SUITE 131  
DORAL, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

10305 NW 41 STREET  
SUITE 131  
DORAL, FL 33178

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **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:**

REYES, ALEJANDRO  
10305 NW 41 STREET  
SUITE 131  
DORAL, FL 33178 US

**Name and Address of New Registered Agent:**

DELGADILLO, LUIS  
10305 NW 41 STREET  
SUITE 131  
DORAL, FL 33178 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: LUIS DELGADILLO

09/02/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: REYES, ALEJANDRO  
Address: 10305 NW 41 STREET, SUITE 131  
City-St-Zip: DORAL, FL 33178

Title: S ( ) Delete  
Name: CASTILLO, PEDRO  
Address: 10305 NW 41 STREET, SUITE 131  
City-St-Zip: DORAL, FL 33178

Title: T ( ) Delete  
Name: HIRLEMAN, ENRIQUE  
Address: 10305 NW 41 STREET, SUITE 131  
City-St-Zip: DORAL, FL 33178

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: DELGADILLO, LUIS  
Address: 10305 NW 41 STREET, SUITE 131  
City-St-Zip: DORAL, FL 33178

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: LUIS DELGADILLO

PRES

09/02/2009

Electronic Signature of Signing Officer or Director

Date