

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003633

FILED  
Mar 22, 2010  
Secretary of State

**Entity Name:** LATIN AMERICAN MOTORCYCLE ASSOCIATION MIAMI BEACH CHAPTER, INC.

**Current Principal Place of Business:**

3971 S.W. 8TH STREET  
SUITE 209  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

3971 S.W. 8TH STREET  
SUITE 209  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 26-4699040

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALVAREZ, NESTOR  
3971 S.W. 8TH STREET  
SUITE 209  
CORAL GABLES, FL 33134 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  
Name: ALVAREZ, NESTOR  
Address: 3971 S.W. 8TH STREET #209  
City-St-Zip: CORAL GABLES, FL 33134

Title: TD  
Name: GONZALEZ, CARIELKA  
Address: 16730 NW 48 COURT  
City-St-Zip: MIAMI, FL 33055

Title: D  
Name: MATA, ANTONIO  
Address: 2194 NW 21 STREET  
City-St-Zip: MIAMI, FL 33142

I hereby 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 all other like empowered.

SIGNATURE: NESTOR ALVAREZ

P

03/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date