

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000009107

FILED  
Apr 28, 2012  
Secretary of State

**Entity Name:** DR-CAFTA CHAMBERS OF COMMERCE ALLIANCE , INC.

**Current Principal Place of Business:**

2656 NW 97TH AVE  
DORAL, FL 33172

**New Principal Place of Business:**

2656 NW 97TH AVE  
DORAL, FL 33172 UN

**Current Mailing Address:**

2656 NW 97TH AVE  
DORAL, FL 33172

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

PALOMO, GUILLERMO E JR.  
2656 NW 97TH AVE  
DORAL,, FL 33172 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: P  
Name: DELGADILLO, LUIS  
Address: 2656 NW 97TH AVE  
City-St-Zip: DORAL, FL 33172

Title: D  
Name: PENA, GUSTAVO  
Address: 2656 NW 97TH AVE  
City-St-Zip: DORAL, FL 33172

Title: T  
Name: HUETE, RODRIGO  
Address: 2656 NW 97TH AVE  
City-St-Zip: DORAL, FL 33172

Title: S  
Name: MADRIGAL, FELIPE E  
Address: 2656 NW 97TH AVE  
City-St-Zip: DORAL, FL 33172

Title: D  
Name: PALOMO, GUILLERMO E JR.  
Address: 2656 NW 97TH AVE  
City-St-Zip: DORAL, FL 33172

Title: D  
Name: ENAMORADO, ARTURO  
Address: 2656 NW 97TH AVE  
City-St-Zip: DORAL, FL 33172

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: FELIPE E, MADRIGAL

S

04/28/2012

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

\_\_\_\_\_  
Date