

1/10/01-5

# 2001 UNIFORM BUSINESS REPORT (UBR)

# FILED Feb 08, 2001 8:00 am Secretary of State

01-10-2001 90134 019 \*\*\*\*61.25

## DOCUMENT # N37819

1. Entity Name

**DORAL & AIRPORT WEST CHAMBER OF COMMERCE, INC.** ✓

Principal Place of Business

8181 NW 36 ST  
STE 14E  
MIAMI FL 33166  
US

Mailing Address

8181 NW 36 ST  
STE 14E  
MIAMI FL 33166  
US

2. Principal Place of Business

3. Mailing Address

*8181 NW 36th ST*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

*SUITE 3*

City & State

City & State  
*MIAMI FL*

4. FEI Number

65-0282586

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PIEDRA, MILTON D.  
8181 NW 36TH ST  
#14E  
MIAMI FL 33166

Name  
*ARTHUR WALKER*

Street Address (P.O. Box Number is Not Acceptable)  
*8181 NW 36th ST*

City  
*SUITE 3*

City  
*MIAMI*

FL

Zip Code  
*33166*

8. 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

*Arthur Walker* ARTHUR WALKER EXEC. DIR

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE VP  Delete  
NAME SOMAN, JOANN  
STREET ADDRESS 8181 NW 14TH ST SUITE 300  
CITY-ST-ZIP MIAMI FL 33178 *D*

TITLE VPD  Delete  
NAME ABBATE JR, ANDRE G  
STREET ADDRESS 9929 COSTA DEL SOL BLVD  
CITY-ST-ZIP MIAMI FL 33178

TITLE TD  Delete  
NAME GONZALEZ, EDUARDO  
STREET ADDRESS 8180 NW 36TH ST 100  
CITY-ST-ZIP MIAMI FL 33166

TITLE D  Delete  
NAME PIEDRA, MILTON D  
STREET ADDRESS 8181 NW 36TH ST SUITE 14E  
CITY-ST-ZIP MIAMI FL 33166

TITLE VP  Delete  
NAME MADRIGAL, FELIPE  
STREET ADDRESS 1565 NW 88TH AVE UNIT C  
CITY-ST-ZIP MIAMI FL 33172 *D*

TITLE SC  Delete  
NAME ENOS, JENNIFER  
STREET ADDRESS 10145 NW 19TH ST  
CITY-ST-ZIP MIAMI FL 33172 *D*

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE EXECUTIVE DIRECTOR  Change  Addition  
NAME  
STREET ADDRESS 8181 NW 36th ST  
CITY-ST-ZIP STE 3 MIAMI, FL 33166 *D*

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*SICILIE CALKINS*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*1/2/01*  
Date

*3055925141*  
Daytime Phone #

CR2E037 (10/00)