

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48264

FILED
May 28, 2009
Secretary of State

Entity Name: SOUTH FLORIDA PUERTO RICAN CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

3550 BISCAYNE BLVD
STE 306
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

3550 BISCAYNE BLVD
STE 306
MIAMI, FL 33137 US

New Mailing Address:

FEI Number: 65-0318798 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

GUTIERREZ, VICTOR T.
3550 BISCAYNE BLVD 306
MIAMI, FL 33137 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: CD () Delete
Name: GUTIERREZ, VICTOR T
Address: 3550 BISCAYNE BLVD 306
City-St-Zip: MIAMI, FL 33131

Title: D (X) Delete
Name: BLONDETT, LILLIAN
Address: 3550 BISCAYNE BLVD #306
City-St-Zip: MIAMI, FL 33157

Title: C () Delete
Name: TORRES, RAYMOND
Address: 3550 BISCAYNE BLVD # 306
City-St-Zip: MIAMI, FL 33137

Title: S () Delete
Name: MOJICA, HENRY
Address: 3550 BISCAYNE BLVD 306
City-St-Zip: MIAMI, FL 33137

Title: T () Delete
Name: DEL VALLE, MANUEL
Address: 3550 BISCAYNE BLVD 306
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: TORRES, RAYMOND
Address: 3550 BISCAYNE BLVD 306
City-St-Zip: MIAMI, FL 33131

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: GUTIERREZ, VICTOR T
Address: 3550 BISCAYNE BLVD # 306
City-St-Zip: MIAMI, FL 33137

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: RAYMOND TORRES

CD

05/28/2009

Electronic Signature of Signing Officer or Director

Date