

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005403

FILED
Feb 04, 2009
Secretary of State

Entity Name: ASSOCIATION DES CONSEILLERS DU COMMERCE EXTERIEUR DE LA FRANCE DE FLORIDE ET DES CARAIBES, INC.

Current Principal Place of Business:

ESPIRITO SANTO PLAZA, 1395 BRICKELL AVE.
STE 1050
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1200 ANASTASIA AVENUE
STE 410
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 31-1478503 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

EDELSTEIN, STEVEN A
1200 ANASTASIA AVENUE
STE 410
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 () Delete
Name: MICHEL CAFFIN, JEAN
Address: 7331 S.W. 116TH TERRACE
City-St-Zip: MIAMI, FL 33156

Title: VPSD () Delete
Name: MAINCOURT, CHRISTOPHE Y
Address: 550 BILTMORE WAY, PENTHOUSE 1
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD () Delete
Name: BRION, JACQUES
Address: 1235 WINDING OAKS CIRCLE
City-St-Zip: VERO BEACH, FL 32963

Title: TD () Delete
Name: MIQUEL, JEAN-PIERRE
Address: 2000 S. BAYSHORE DR #35
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MIQUEL, JEAN-PIERRE

TD

02/04/2009

Electronic Signature of Signing Officer or Director

_____ Date