

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000798

FILED
Mar 16, 2007
Secretary of State

Entity Name: URUGUAYAN AMERICAN CHAMBER OF COMMERCE (FLORIDA), INC.

Current Principal Place of Business:

1717 N. BAYSHORE DRIVE
SUITE 106 C/O RAFFI HAGOPIAN
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

1717 N. BAYSHORE DRIVE
SUITE 106 C/O RAFFI HAGOPIAN
MIAMI, FL 33132

New Mailing Address:

FEI Number: 65-0747886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAGOPIAN, RAFFI
1717 N. BAYSHORE DRIVE
SUITE 106
MIAMI, FL 33132 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: D () Delete
Name: IBARGOYEN, SIDHARTA
Address: 1717 N. BAYSHORE DRIVE # 106
City-St-Zip: MIAMI, FL 33132

Title: D () Delete
Name: BERNASCONI, RICARDO
Address: 1717 N. BAYSHORE DRIVE # 106
City-St-Zip: MIAMI, FL 33132

Title: D () Delete
Name: TANO FEIJO, RICARDO W
Address: 2753 SW 19TH TERRACE
City-St-Zip: MIAMI, FL 33145

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: IBARGOYEN, SIDHARTA
Address: 1717 N. BAYSHORE DRIVE # 106
City-St-Zip: MIAMI, FL 33132

Title: P (X) Change () Addition
Name: BERNASCONI, RICARDO
Address: 1717 N. BAYSHORE DRIVE # 106
City-St-Zip: MIAMI, FL 33132

Title: T (X) Change () Addition
Name: HAGOPIAN, RAFFI
Address: 1717 N. BAYSHORE DRIVE # 106
City-St-Zip: MIAMI, FL 33132

Title: VP () Change (X) Addition
Name: RODRIGUEZ, SANTIAGO
Address: 1717 N. BAYSHORE DRIVE # 106
City-St-Zip: MIAMI, FL 33132

I hereby certify that the information supplied with this filing does not qualify for the 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: HAGOPIAN, RAFFI

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03/16/2007

Electronic Signature of Signing Officer or Director

Date