

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2008 08:00 A
Secretary of State

DOCUMENT # N96000002083
 1. Entity Name
ALLAPATTAH CHAMBER OF COMMERCE COMMUNITY SERVICES, INC.



Principal Place of Business Mailing Address
2634 A. N.W. 21 TERR **2634 A. N.W. 21 TERR**
MIAMI, FL 33142 **MIAMI, FL 33142**

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03032008 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0737685	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
GONZALEZ, ANGEL
2634 A NW 21 TERR
MIAMI, FL 33142

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GONZALEZ, ANGEL 2634-A NW 21 TERR., MIAMI, FL MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUILLERMO, NOVO 3070 NW 196 CT MIAMI, FL 33125
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUEITS, CARLOS 2634-A NW 21 TERR. MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Angel Gonzalez 3/7/08 786-251-58-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #