

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000124

FILED
May 10, 2005
Secretary of State

Entity Name: AVENTURA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

18305 BISCAYNE BLVD., STE. 300
AVENTURA, FL 33160

New Principal Place of Business:

1300 NW 167TH STREET
SUITE 1
MIAMI GARDENS, FL 33169

Current Mailing Address:

18305 BISCAYNE BLVD., STE. 300
AVENTURA, FL 33160

New Mailing Address:

1300 NW 167TH STREET
SUITE 1
MIAMI GARDENS, FL 33169

FEI Number: 65-0742856 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

MARSHALL, M. KEITH
18305 BISCAYNE BLVD., STE. 300
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

KOTZEN, MATTHEW C ESQ.
1300 NW 167TH STREET
SUITE 1
MIAMI GARDENS, FL 33169 US

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: MATTHEW C. KOTZEN, ESQ.

05/10/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: HUBSCHMAN, EMIL
Address: 3640 YACHT CLUB DR., UNIT 1802
City-St-Zip: AVENTURA, FL 33180

Title: PD (X) Delete
Name: MARSHALL, M. KEITH
Address: 18305 BISCAYNE BLVD., STE. 300
City-St-Zip: AVENTURA, FL 33160

Title: D (X) Delete
Name: FAZE, SUZANNE
Address: 190501 BISCAYNE BLVD, #400
City-St-Zip: AVENTURA, FL 33180

Title: VD (X) Delete
Name: FINE, JO-ANN
Address: 20281 E COUNTRY CLUB DR
City-St-Zip: AVENTURA, FL 33180

Title: D (X) Delete
Name: KOTZEN, MATHEW ESQ
Address: 1700 SAN SOUCI BLVD
City-St-Zip: NORTH MIAMI, FL 33181

Title: D (X) Delete
Name: LEVINE, KAREN
Address: 1075 NE 167TH ST
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: RANSFORD, JOEL
Address: 1300 NW 167TH STREET, SUITE 1
City-St-Zip: MIAMI GARDENS, FL 33169

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

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

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Title: () Change () Addition
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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 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 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: JOEL M. RANSFORD

PRES

05/10/2005

Electronic Signature of Signing Officer or Director

Date