

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000124

FILED
Aug 17, 2007
Secretary of State

Entity Name: AVENTURA-SUNNY ISLES BEACH CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

20533 BISCAYNE BLVD.
536
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

20533 BISCAYNE BLVD.
536
AVENTURA, FL 33180

New Mailing Address:

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:

SHEINHEIT, DAVID
20801 BISCAYNE BLVD
202
AVENTURA, FL 33180 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: PRES () Delete
Name: SHEINHEIT, DAVID
Address: 20801 BISCAYNE BLVD, 202
City-St-Zip: AVENTURA, FL 33180

Title: DIR () Delete
Name: COSONAS, CHARLES
Address: 3544 MAGELLEN CIR, 117
City-St-Zip: AVENTURA, FL 33180

Title: DIR () Delete
Name: WINSTON, LES
Address: 11975 W DIXIE HWY
City-St-Zip: N MIAMI, FL 33161

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

Title: DIR () Delete
Name: LEVINE, KAREN
Address: 1075 NE 167 STREET
City-St-Zip: N MIAMI BEACH, FL 33162

Title: DIR () Delete
Name: BLUESTEIN, MARK
Address: 5225 NW 87 AVE, #100
City-St-Zip: MIAMI, FL 33178

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:

Title: DIR (X) Change () Addition
Name: BEN-SHALOM, KIM
Address: 1105 E HALLANDALE BEACH BLVD
City-St-Zip: HALLANDALE, FL 33009

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: DAVID SHEINHEIT

PRES

08/17/2007

Electronic Signature of Signing Officer or Director

Date