## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9700000124

FILED Apr 29, 2009 Secretary of State

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

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
20533 BIS	CAYNE BLVD.					
536 AVENTUR	A, FL 33180					
	ailing Addres	s:	New Maili	ng Address	s:	
20533 BIS	CAYNE BLVD.			_		
536	A, FL 33180					
	65-0742856	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:		, ,	of New Registered Agent:	
		anioni regiotorea rigenti				
SHEINHEIT, DAVID 20801 BISCAYNE BLVD			20807 BIS	SHEINHEIT, DAVID 20807 BISCAYNE BLVD		
202 AVENTURA, FL 33180 US				FIFTH FLOOR AVENTURA, FL 33180 US		
	named entity s of Florida.	submits this statement for the	purpose of changing	its registered	d office or registered agent, or both,	
SIGNATUF	RE: DAVID SI	HEINHEIT			04/29/2009	
	Electron	ic Signature of Registered Ag	ent		Date	
OFFICERS	S AND DIREC	TORS:	ADDITION	IS/CHANGE	ES TO OFFICERS AND DIRECTORS	
Fitle: Name: Address: City-St-Zip:	PRES ( ) SHEINHEIT, DA 20801 BISCAYI AVENTURA, FL	NE BLVD, 202	Title: Name: Address: City-St-Zip:		AYNE BLVD,	
Fitle: Name: Address: City-St-Zip:	DIR () OCHOA, ROLAI 20533 BISCAYI AVENTURA, FL	NE BLVD #536	Title: Name: Address: City-St-Zip:		() Change () Addition	
Fitle: Name: Address: City-St-Zip:	DIR ( ) WINSTON, LES 11975 W DIXIE N MIAMI, FL 33	HWY	Title: Name: Address: City-St-Zip:		() Change () Addition	
Fitle: Name: Nddress: City-St-Zip:	DIR ( ) HUBSCHMAN, I 3640 YACHT C AVENTURA, FL	LUB DR. 1802	Title: Name: Address: City-St-Zip:		() Change () Addition	
Fitle: Name: Address: City-St-Zip:	BEN-SHALOM,	NDALE BEACH BLVD	Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition IL KWATER TERR DD, FL 33019	
Fitle: Name: Address: City-St-Zip:	DIR ( ) BLUESTEIN, M 5225 NW 87 AV MIAMI, FL 331	/E, #100	Title: Name: Address: City-St-Zip:		() Change () Addition	

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 04/29/2009