2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000002704

FILED May 01, 2003 Secretary of State

Entity Name: ASSOCIATION OF BI-NATIONAL CHAMBERS OF COMMERCE OF FLORIDA, INC.

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:		
548 S MAS KEY BISC.	SHTA DR AYNE, FL 33149	US	260 CRANDON BOU SUITE 32-136 KEY BISCAYNE, FL		
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
PO BOX 2 HALLAND	877 ALE, FL 33008				
FEI Number	: 65-0773083	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
JAVELLAN		LDLVD 406			
HALLAND The above		US	purpose of changing its register	red office or registered agent, or both,	
HALLAND The above in the State	ALE, FL 33009 named entity su e of Florida.	US	purpose of changing its register	red office or registered agent, or both,	
HALLAND The above	ALE, FL 33009 named entity sue of Florida. RE:	US bmits this statement for the			
HALLAND The above in the State	ALE, FL 33009 named entity sue of Florida. RE:	US		red office or registered agent, or both, Date	
HALLAND The above In the State SIGNATUI	ALE, FL 33009 named entity sue of Florida. RE:	US bmits this statement for the Signature of Registered Ac	gent		
HALLAND The above In the State SIGNATUI	ALE, FL 33009 named entity sue of Florida. RE: Electronic	US bmits this statement for the Signature of Registered Agores:	gent	Date	
HALLAND The above in the State SIGNATUI OFFICER: Vame: Address:	ALE, FL 33009 named entity suite of Florida. RE: Electronic S AND DIRECTO PD () D HAEGER, LITA 548 S MASHTA DI KEY BISCAYNE, F DV () D RIEDI, CLAUDIO	US bmits this statement for the Signature of Registered Ag ORS: elete R FL 33149 US elete BLVD, 21ST FLOOR	gent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTOR	

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: TY JAVELLANA D 05/01/2003