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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000003297

1. Corporation Name
TRINIDAD & TOBAGO/U.S.A. CHAMBER OF COMMERCE, IN C.

Principal Place of Business	Mailing Address
2900 UNIVERSITY DRIVE CORAL SPRINGS FL 33065	2900 UNIVERSITY DRIVE CORAL SPRINGS FL 33065

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified: 06/08/1998

4. FEI Number: 65-0844955 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

GLASGOW, RICKERT P
2900 UNIVERSITY DRIVE
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name: RAHAEL, GEORGE
82 Street Address (P.O. Box Number Is Not Acceptable): 2900 University Drive
83
84 City: Coral Springs FL 85 Zip Code: 33065

11. Pursuant to the provisions of Sections 617.0202 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: George Rahael — DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BALGOBIN, WILBUR	1.2 NAME	
STREET ADDRESS	500 E OAKLAND PARK BLVD	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33334	1.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	DEEN, BADRU	2.2 NAME	
STREET ADDRESS	7720 SW 168TH TERR	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33157	2.4 CITY-ST-ZIP	
TITLE	D ☒ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	GLASGOW, RICKERT P	3.2 NAME	
STREET ADDRESS	3000 BISCAYNE BLVD #504	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33137	3.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	HEADLEY, IRVINE	4.2 NAME	
STREET ADDRESS	16155 SW 117TH AVE #B-3	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33157	4.4 CITY-ST-ZIP	
TITLE	D ☒ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	MCLEOD, MICHAEL	5.2 NAME	
STREET ADDRESS	2361 NW 67TH AVE #B-240	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33122	5.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	ROSTANT, DENNIS	6.2 NAME	
STREET ADDRESS	4709 NW 72ND AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33166	6.4 CITY-ST-ZIP	

CR2E037 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Trinidad & Tobago/U.S.A. Chamber of Commerce, Inc. — George Rahael, Director — 4/5/99 — 954-340-5868
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #