

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002189

FILED
Aug 09, 2006
Secretary of State

Entity Name: AKWA IBOM STATE ASSOCIATION OF NIGERIA (U.S.A.), INC., MIAMI CHAPTER

Current Principal Place of Business:

17970 SW 134TH COURT
MIAMI, FL 33177

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 770936
MIAMI, FL 33177

New Mailing Address:

FEI Number: 65-0917852 **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:

Name and Address of New Registered Agent:

ETTANG, ENOBONG C MS.
17970 SW 134TH CT
MIAMI, FL 33177 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ETTANG, ENOBONG C MS.
Address: 17970 SW 134TH CT
City-St-Zip: MIAMI, FL 33177

Title: DVP () Delete
Name: ROBERT, INI MR.
Address: 20464 SW 5TH ST.
City-St-Zip: PEMBROKE PINES, FL 33029

Title: DFS () Delete
Name: UMOH, JIMMY DR.
Address: 1914 SW TH TERR
City-St-Zip: MIRAMAR, FL 33029

Title: DPRO () Delete
Name: OKON, BASSEY MR.
Address: 1190 N>STATE RD 7 #215
City-St-Zip: FT.LAUDERDALE, FL 33312

Title: DT () Delete
Name: EKWERE, PHILOMENA MRS.
Address: 2648 BAHAMAS DR.
City-St-Zip: MIRAMAR, FL 33023

Title: DSP () Delete
Name: IKPE, IBANGA DR.
Address: 8420 SW 320 CT. #103
City-St-Zip: PEMBROKE PINES, FL 33025

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: () Change () Addition
Name:
Address:
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 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: ENOBONG ETTANG

MS

08/09/2006

Electronic Signature of Signing Officer or Director

Date