2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000067814

FILED Apr 26, 2007 Secretary of State

Entity Name: PHILIPPINE AMERICAN CHAMBER OF COMMERCE OF COMMERCE OF

INC

DADE-BROWARD,

Current Principal Place of Business: New Principal Place of Business:

1010 SW 46TH AVE 2400 WEST CYPRESS CREEK RD.

SUITE 207 SUITE 112

POMPANO BEACH, FL 33069 FORT LAUDERDALE, FL 33309 US

Current Mailing Address: New Mailing Address:

1010 SW 46TH AVE 2400 WEST CYPRESS CREEK RD

SUITE 207 SUITE 112

POMPANO BEACH, FL 33069 FORTLAUDERDALE, FL 33309 US

FEI Number: 03-0562960 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARJORIE ALEXIS ESQ 99 NW 183RD ST SUITE 240

SUITE 240 MIAMI, FL 33169 US BAKER, LILIA T 2400 WEST CYPRESS CREEK RD SUITE 112

FORT LAUDERDALE, FL 33309 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: LILIA T. BAKER 04/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO () Delete Title: PCEO (X) Change () Addition

 Name:
 BAKER, LILIA T
 Name:
 BAKER, LILIA T

 Address:
 3267NW 44TH ST UNIT 5
 Address:
 1010 SW 46TH AVE

City-St-Zip: OAKLAND PARK, FL 33069 City-St-Zip: POMPANO BEACH, FL 33069 US

Title: () Delete Title: VP () Change (X) Addition

 Name:
 Name:
 HADLAND, GLENN E

 Address:
 Address:
 1010 SW 46TH AVE 207

 City-St-Zip:
 City-St-Zip:
 POMPANO BEACH, FL 33069

Title: () Delete Title: S () Change (X) Addition

Name: Name: TORRES, RALPH

 Name
 Name
 TORRES, KALPH

 Address:
 Address:
 1010 SW 46TH AVE UNIT 207

 City-St-Zip:
 City-St-Zip:
 POMPANO BEACH, FL 33069 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LILIA T. BAKER PCEO 04/26/2007