

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000113220

**FILED**  
**Apr 29, 2008**  
**Secretary of State**

**Entity Name:** PHILIPPINE AMERICAN CHAMBER OF COMMERCE OF BOCA RATON AND THE PALM BEACHES INC.

**Current Principal Place of Business:**

1600 SOUTH DIXIE HWY.  
107  
BOCA RATON,, FL 33432 US

**Current Mailing Address:**

1600 SOUTH DIXIE HWY.  
107  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

6444 LA COSTA DRIVE  
204  
BOCA RATON,, FL 33433 US

**New Mailing Address:**

6444 LA COSTA DRIVE  
204  
BOCA RATON,, FL 33433 US

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

BARRAMEDA, ROSARIO M  
6444 LA COSTA DRIVE  
204  
BOCA RATON, FL 33433 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CRUZ, EMMANUEL R  
Address: 16 ROYAL PALM WAY #105  
City-St-Zip: BOCA RATON, FL 33432 US

Title: VP ( ) Delete  
Name: BARRAMEDA, MARIA ROSARIO M  
Address: 6444 LA COSTA DRIVE #204  
City-St-Zip: BOCA RATON, FL 33433 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: MARIA R BARRAMEDA

VP

04/29/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date