

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009810

FILED  
May 01, 2011  
Secretary of State

**Entity Name:** MIAMI CHRISTIAN CHAMBER OF COMMERCE, INC.

**Current Principal Place of Business:**

401 EAST LAS OLAS BLVD.  
SUITE 1400  
FORT LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

401 EAST LAS OLAS BLVD.  
SUITE 1400  
FORT LAUDERDALE, FL 33301

**New Mailing Address:**

**FEI Number:** 20-0690691

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SOLAMBIT LAW GROUP  
401 EAST LAS OLAS BLVD.  
SUITE 1400  
FORT LAUDERDALE, FL 33301 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

**OFFICERS AND DIRECTORS:**

Title: DS  
Name: LUNA, GUILLERMO L DR.  
Address: 557 NW 99 COURT  
City-St-Zip: MIAMI, FL 33172

Title: D  
Name: ROBLEDO, MARK E  
Address: 9835 SW 80 DR  
City-St-Zip: MIAMI, FL 33173

Title: DVPT  
Name: ARANA, LESTER  
Address: 780 NW 42ND AVENUE  
City-St-Zip: MIAMI, FL 33126

Title: D  
Name: HERNANDEZ, RENE A  
Address: 9130 S DADELAND BLVD STE 1623  
City-St-Zip: MIAMI, FL 33156

Title: DP  
Name: GARCIA, WILLIE  
Address: 7748 SW 95TH TERRACE  
City-St-Zip: MIAMI, FL 33156

I hereby 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 all other like empowered.

SIGNATURE: LESTER ARANA

DVPT

05/01/2011

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

\_\_\_\_\_  
Date