

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000004018

Entity Name: BELIZE AMERICAN CHAMBER OF COMMERCE OF FLORIDA, INC.**FILED**
Apr 29, 2019
Secretary of State
7162262972CC**Current Principal Place of Business:**10001 W OAKLAND PARK BLVD
SUITE 302
SUNRISE, FL 33351**Current Mailing Address:**17113 MIRAMAR PARKWAY
STE 160
MIRAMAR, FL 33027 US**FEI Number: 46-2757194****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CARDOZO, ECKERT & SANCHEZ, PLLC
SAWGRASS BUSINESS PLAZA
13790 NW 4TH ST. SUITE 107
SUNRISE, FL 33325 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: RISHMA ECKERT, ESQ.****04/29/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES, C
Name YOUNG, MICHAEL D MS, LL.M.
Address 17113 MIRAMAR PARKWAY
STE 160
City-State-Zip: MIRAMAR FL 33027

Title VC
Name YOUNG, DESIREE D MPA, ABD
Address 17113 MIRAMAR PARKWAY
STE 160
City-State-Zip: MIRAMAR FL 33027

Title GC
Name ECKERT, RISHMA D ESQ.
Address 13790 NW 4TH ST.
SUITE 107
City-State-Zip: SUNRISE FL 33325

Title VC
Name BARROW, STEVEN C
Address P.O. BOX
City-State-Zip: TEMECULA CA 92592

Title ADVISOR
Name CANTON, GILBERT H
Address PO BOX 2298
City-State-Zip: BELIZE CITY

Title EXECUTIVE SECRETARY
Name CASTILLO, LUCINDA F.
Address PO BOX 2470
City-State-Zip: BELIZE CITY

Title VC
Name ARANA, GREGORY DR.
Address 1210 NW 92ND AVE
City-State-Zip: PEMBROKE PINES FL 33024

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: MICHAEL D YOUNG**ED****04/29/2019**

Electronic Signature of Signing Officer/Director Detail

Date