

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 15, 2001 8:00 am
Secretary of State

02-15-2001 90011 006 ****61.25

UBR 501 UCR

DOCUMENT # 762203

1. Entity Name
PHILIPPINE AMERICAN ASSOCIATION OF SOUTH FLORIDA

Principal Place of Business 3801 N FEDERAL HWY POMPANO BCH FL 33064 US	Mailing Address 3801 N FEDERAL HWY POMPANO BCH FL 33064 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2674451	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GAUDIOSI, JOHN 3801 N. FEDERAL HWY POMPANO BEACH FL 33064	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating)

Signature, typed or printed name of registered agent and title if applicable. DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	X D SCHULTE, NEMIA L 2335 E ATLANTIC BLVD #300 POMPANO BCH FL 33062 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Dency BARRIAS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5160 SW 19th St Plantation A 33317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GORDON, ALICE <input checked="" type="checkbox"/> Delete 1200 SW 12TH ST DEERFIELD BEACH FL 33341	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Nida Winnett, Vice Pres <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 11761 SW 52 Court Cooper City, FL 33330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WINNETT, NIDA O <input checked="" type="checkbox"/> Delete 11761 SW 52ND CT COOPER CITY FL 33330	TITLE NAME STREET ADDRESS CITY-ST-ZIP	John Gaudiosi, Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PO Box 5369 Pompano Beach, FL 33074
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARCIA, RIC <input checked="" type="checkbox"/> Delete 1085 DEERWOOD LN WESTON FL 33326	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Nash Calairo, Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3801 NO. FEDERAL HWY POMPANO BEACH, FL 33064
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOMAN, BERTHO <input type="checkbox"/> Delete 11600 NW 20TH ST PLANTATION FL 33323	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jose Espejo, D <input type="checkbox"/> Change <input type="checkbox"/> Addition 10880 NW 29 MANOR Sunrise, FL 33322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALINDO, DIOSDADO <input checked="" type="checkbox"/> Delete 11871 SW 43RD ST DAVIE FL 33330	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Oscar Sanchez, D <input type="checkbox"/> Change <input type="checkbox"/> Addition 280 Racquet Road Weston, FL 33326

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **REQUIRED** 2/10/2001 Date Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/00)