2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#762203

Title:

Name:

Address:

City-St-Zip:

FILED May 13, 2004 Secretary of State

Entity Name: PHILIPPINE AMERICAN ASSOCIATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 5160 SW 19 STREET PLANTATION, FL 33317 LIS **Current Mailing Address: New Mailing Address:** 5160 SW 19 STREET PLANTATION, FL 33317 US FEI Number: 59-2674451 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: BARRIAS, PRUDENCIO S 5160 SW 19 STREET PLANTATION, FL 33317 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete RIVERA, ELLEN RUDIO, LOLITA Name: Name: 600 SE 6 TERRACE Address: PO BOX 266383 Address: City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: WESTON, FL 33326 Title: () Delete Title: (X) Change () Addition RANCEZ, OSCAR Name: RANCEZ, GERLINDA Name: Address: 280 RACQUET CLUB ROAD #105 Address: 280 RACQUET CLUB ROAD #105 City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326 Title: () Delete Title: (X) Change () Addition RUDIO, LOLITA Name: WAXMAN, MARIA Name: PO BOX 266383 950 BAYBERRY POINT DRIVE Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: PLANTATION, FL 33324 Title: () Delete Title: (X) Change () Addition Name: DALMACIO, TECHIE Name: DALMACIO, TECHIE 721 THORNRIDGE AVENUE 721 THORNRIDGE AVENUE Address: Address: City-St-Zip: **DAVIE, FL 33325** City-St-Zip: **DAVIE, FL 33325** Title: () Delete Title: (X) Change () Addition BONGIOVI, LOUIS CATIBAG, ROD Name: Name: 13651 NEWPORT MANOR 2825 S OAKLAND FOREST DRIVE #103 Address: Address: City-St-Zip: **DAVIE, FL 33325** City-St-Zip: OAKLAND PARK, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LOLITA RUDIO P 05/13/2004

(X) Delete

7261 MACARTHUR PARKWAY

HOLLYWOOD, FL 33024

PATIO, BONG

() Change () Addition