

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006381

FILED
Mar 10, 2009
Secretary of State

Entity Name: SOUTH FLORIDA ECONOMIC EMPOWERMENT, INC

Current Principal Place of Business:

5555 NORTHWEST 95 AVENUE
SUNRISE, FL 33351 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 9726
FT LAUDERDALE, FL 33310 US

New Mailing Address:

FEI Number: 65-0792593

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FERNANDEZ, HENRY
4007 SANDERLING LANE
WESTON, FL 33331 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: PSD () Delete
Name: FERNANDEZ, HENRY
Address: 4007 SANDERLING LANE
City-St-Zip: WESTON, FL 33331

Title: D () Delete
Name: RICHARDS, ERIC
Address: 807 NW 57TH AVENUE
City-St-Zip: TAMARAC, FL 33319 US

Title: D () Delete
Name: SIMS, EDDIE
Address: 7951 SW 7TH CT
City-St-Zip: N LAUDERDALE, FL 33068

Title: D () Delete
Name: HANKERSON, BRIAN
Address: 341 N 66TH TERRACE
City-St-Zip: HOLLYWOOD, FL 33024

Title: DT () Delete
Name: PESSOA, PAUL
Address: 15624 SOUTHWEST 53 COURT
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN HANKERSON

D

03/10/2009

Electronic Signature of Signing Officer or Director

Date