

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000136176

FILED
Jul 12, 2006
Secretary of State

Entity Name: RESOURCES SOUTH FLORIDA INC

Current Principal Place of Business:

2618 ARTHUR STREET
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

2618 ARTHUR STREET
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 20-3632026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNITZER, GERALD S
2900 N 29 COURT
200
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

LEVINE, JACK CPA
16855 NE 2ND AVENUE
SUITE 303
NORTH MIAMI BEACH, FL 33162 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: JACK LEVINE, CPA

07/12/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: ZALESKY, LEANNE
Address: 2618 ARTHUR STREET
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ZALESKI, LEANNE
Address: 2618 ARTHUR STREET
City-St-Zip: HOLLYWOOD, FL 33020

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEANNE ZALESKI

PSTD

07/12/2006

Electronic Signature of Signing Officer or Director

Date