2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000104542

1. Entity Name

SOUTH FLORIDA COUNSELING AGENCY INC



FILED May 02, 2008 08:00 AN Secretary of State

Principal Place of Business

12683 SW 8TH COURT DAVIE, FL 33325 Mailing Address

12683 SW 8TH COURT DAVIE, FL 33325



DO NOT WRITE IN THIS SPACE

04292008 No Chg-P CR2E034 (11/05)

 4. FEI Number
 Applied For

 20-5366416
 Not Applicable

6. Name and Address of Current Registered Agent

CUENTRO, KARINA G 12683 SW 8TH COURT DAVIE, FL 33325

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
FILE NOWII! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Camp Trust Fund Co			cing	\$5.00 May Be Added to Fees	U00000945080 05/29/08-80124-018 150.00
10.	OFFICERS AND DIREC	CTORS		•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CUENTRO, KARINA G 12683 SW 8TH COURT DAVIE, FL 33325				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					•
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-	DO	NOT WRITE
TITLE NAME STREET ADDRESS CHY-ST-ZIP				IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					

OF SIGNING OFFICER OR DIRECTOR