

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90392 010 \*\*\*\*70.00

**DOCUMENT # 711325**

1. Entity Name

**BUILDERS ASSOCIATION OF SOUTH FLORIDA, INC.**



Principal Place of Business

15225 N W 77 AVE  
MIAMI LAKES FL 33014

Mailing Address

15225 N W 77 AVE  
MIAMI LAKES FL 33014

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0525914

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional  
Fee Required**

1st MOORE

CR2E037 (10/06)



6. Name and Address of Current Registered Agent

**PACELLI-HINKLEY, TONI**  
**15225 NW 77TH AVE**  
**MIAMI LAKES FL 33014**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution.



**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete  
NAME DRODY, LANI KAHN  
STREET ADDRESS 80 SW 8TH ST SUITE 1870  
CITY-ST-ZIP MIAMI FL 33131

TITLE VD ☒ Delete  
NAME CALLEIRO, JC  
STREET ADDRESS 11100 NW 138TH ST  
CITY-ST-ZIP MIAMI FL 33178

TITLE ST ☒ Delete  
NAME GOENAGA, ARMANDO  
STREET ADDRESS 7226 NW 127TH WAY  
CITY-ST-ZIP PARKLAND FL 33076

TITLE PE ☐ Delete  
NAME CANDOSO, SILVIO  
STREET ADDRESS 7975 NW 154TH ST STE 400  
CITY-ST-ZIP MIAMI LAKES FL 33016

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME **PRESIDENT**  
STREET ADDRESS **SILVIO CARDOSO**  
CITY-ST-ZIP **1764 SE 9th Street**  
**FT. LAUDERDALE, FL 33146**

TITLE ☐ Change ☒ Addition  
NAME **PRESIDENT**  
STREET ADDRESS **REY MOLINA**  
CITY-ST-ZIP **7830 NW 175 Street**  
**MIAMI, FL 33015**

TITLE ☐ Change ☒ Addition  
NAME **SEC-Treasurer**  
STREET ADDRESS **ASHLEY BOSCH**  
CITY-ST-ZIP **2655 LESTER RD, SUITE 409**  
**Coral Gables, FL 33134**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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:

*Toni Pacelli-Hinkley, Executive Vice President* 4/20/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #