## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001227

Entity Name: AMBASSADOR SOUTH INC.

**Current Principal Place of Business:** 

3135 S OCEAN DR HALLANDALE, FL 33009

**Current Mailing Address:** 

3135 S OCEAN DR

HALLANDALE, FL 33009 UN

FEI Number: 59-1144223 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, MARILYN PRES. 3135 SO OCEAN DRIVE APT 128 HALLANDALE, FL 33009 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

FILED Jan 24, 2016

**Secretary of State** 

CC4668389351

Officer/Director Detail:

Title P Title VP

NameMARILYN, GARCIANameRINEHART, PETERAddress3135 S. OCEAN DR. #128Address3135 S OCEAN DR #124

City-State-Zip: HALLANDALE FL 33009 City-State-Zip: HALLANDALE FL 33009

Title T Title SECRETARY

Name MARKO, RACHAEL Name GROFF, BILLIE

Address 3135 S OCEAN DR. APT 130 Address 3133 SO OCEAN DR,

City-State-Zip: HALLANDALE FL 33009

City-State-Zip: HALLANDALE FL 33009

City-State-Zip: HALLANDALE FL 33009

Title D

Name CLAIRMONT, ALDELHIED Name PIRILLO, ANTHONY

Address 3135 S OCEAN DR. APT 228 Address 3133 S OCEAN DR APT 127

City-State-Zip: HALLANDALE FL 33009 City-State-Zip: HALLANDALE FL 33009

Title D

Name COTE, ANDRE

Address 3129 S.OCEAN DRIVE #112
City-State-Zip: HALLANDALE BEACH FL 33009

I hereby 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 all other like empowered.

SIGNATURE: MARILYN GARCIA PRESIDENT 01/24/2016

Electronic Signature of Signing Officer/Director Detail

Date