

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000046686

**Entity Name:** FIL-AM GOLF OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

1350 SW 44TH TERRACE  
DEERFIELD BEACH, FL 33442

**Current Mailing Address:**

1350 SW 44TH TERRACE  
DEERFIELD BEACH, FL 33442

**FEI Number:** 45-5482071

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ABUNDO, JUN  
9420 SOUTHAMPTON PLACE  
BOCA RATON, FL 33434 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

**Officer/Director Detail :**

Title P  
Name MANN, SAM  
Address 3792 NW 16TH STREET  
City-State-Zip: LAUDERHILL FL 33311

Title VP  
Name ABUNDO, EMILIO P  
Address 9420 SOUTHAMPTON PLACE  
City-State-Zip: BOCA RATON FL 33434

Title SEC  
Name SAMSON, AMADO D  
Address 1350 SW 44TH TERRACE  
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIR  
Name DELA FUENTE, JESS  
Address C/O 1350 SW 44TH TERRACE  
City-State-Zip: DEERFIELD BEACH FL 33442

Title TREASURER  
Name BAQUIRAN, DANILO  
Address C/O 1350 SW 44TH TERRACE  
City-State-Zip: DEERFIELD BEACH FL 33442

Title DIRECTOR  
Name VALDERROSA, JOSE  
Address 1970 NW 35 TERRACE  
City-State-Zip: COCONUT CREEK FL 33066

Title DIRECTOR  
Name VILLACORTA, EDUARDO F  
Address 1350 SW 44TH TERRACE  
City-State-Zip: DEERFIELD BEACH FL 33442

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

**SIGNATURE:** EMILIO P. ABUNDO III

VP

04/24/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date