## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 232293** 

Entity Name: SOUTH MIAMI LETTER SERVICE INC

FILED Apr 22, 2008 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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95 ANDALUSIA 7296 JACARANDA LANE CORAL GABLES, FL 33134 MIAMI LAKES, FL 33014

Current Mailing Address: New Mailing Address:

95 ANDALUSIA 7296 JACARANDA LANE CORAL GABLES, FL 33134 MIAMI LAKES, FL 33014

FEI Number: 59-0828113 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LONGO,EDWARD
95 ANDALUSIA
CORAL GABLES, FL 33134 US
LONGO,EDWARD
8970 S.W. 87TH STREET
MIAMI, FL 33173 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: 04/22/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition LONGO, EDWARD, LONGO, EDWARD, Name: Name: 95 ANDALUSIA 8970 S.W. 87TH STREET Address: Address: City-St-Zip: CORAL GABLES, FL City-St-Zip: MIAMI, FL 33173

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: LONGO, MARIA Name: LONGO, MARIA

 Name:
 LONGO, MARIA
 Name:
 LONGO, MARIA

 Address:
 95 ANDALUSIA
 Address:
 7296 JACARANDA LANE

 City-St-Zip:
 CORAL GABLES, FL
 City-St-Zip:
 MIAMI LAKES, FL
 33014

 Name:
 LONGO, ANTONETTE,
 Name:
 LONGO, ANTONETTE,

 Address:
 95 ANDALUSIA
 Address:
 8970 S.W. 87TH STREET

 City-St-Zip:
 CORAL GABLES, FL
 City-St-Zip:
 MIAMI, FL 33173

I hereby certify that the information supplied with this filing does not qualify 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: EDWARD M. LONGO PD 04/22/2008