2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #756586

1. Entity Name

ASPIRA OF FLORIDA, INC.



FILED Feb 18, 2008 08:00 AN Secretary of State

Principal Place of Business

4100 NE 2ND AVE.

SUITE 302 MIAMI, FL 33137 Mailing Address

4100 NE 2ND AVE.

SUITE 302 MIAMI, FL 33137



DO NOT WRITE IN THIS SPACE

02112008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-2105537 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COWEN, GERALD E ESQ. 2432 HOLLYWOOD BLVD HOLLYWOOD, FL 33020

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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent eignature required when rematating) OATE					
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financin Trust Fund Contribution.	g 🗆	\$5.00 May Be Added to Fees	U00000831374 02/27/08-80016-001 70.00
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD VAZQUEZ-HERNANDEZ, VICTOR CI 4200 NE 2ND AVENUE, SUITE 302 MIAMI, FL 33137	HAIR			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCP AMY, LYDIA VCHAIR 4200 NE 2 AVENUE, SUITE 302 MIAMI, FL 33137				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CORRY, LAURA TREASUR 4200 NE 2ND AVENUE, SUITE 302 MIAMI, FL 33137		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCF JONES, WENDY VCHAIR 4200 NE 2ND AVENUE MIAMI, FL 33137				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO MARTINEZ, RAUL CEO 4200 NE 2ND AVENUE, SUITE 302 MAIMI, FL 33137				
TITLE NAME STREET ADDRESS	D SIERRA, MIREAM PASTCH 5001 SW 74 CT STE 203				·

12. I hereby certify that the information supplied with this filing 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 617, Florida Statutes: and that my name appears in Block 10 or Block 11 if changed, or on an attachment

CICNIATIDE.

MIAMI, FL 33155

CITY-ST-ZIP

Ravi A. Martinez, Presidente (60 Tebruary 11, 200 305-576-8494