

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768877

FILED
Jan 17, 2006
Secretary of State

Entity Name: SOUTHERN APPAREL EXHIBITORS MEMORIAL FUND, INC.

Current Principal Place of Business:

777 NW 72 AVENUE
3-D-19
MIAMI, FL 33126 US

New Principal Place of Business:

777 NW 72 AVENUE
3098
MIAMI, FL 33126 US

Current Mailing Address:

777 NW 72 AVENUE
3-D-19
MIAMI, FL 33126 US

New Mailing Address:

777 NW 72 AVENUE
3098
MIAMI, FL 33126 US

FEI Number: 59-6071516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKINNER, DONNA R
777 NW 72 AVENUE
#3-D-19
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

SKINNER, DONNA R
777 NW 72 AVENUE
3098
MIAMI, FL 33126 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:

01/17/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: SACHS, MARK
Address: 777 NW 72ND AVE STE 3D19
City-St-Zip: MIAMI, FL 33126

Title: VD () Delete
Name: GIESE, PAULETTE
Address: 777 NW 72ND AVE STE 3D19
City-St-Zip: MIAMI, FL 33126

Title: STD () Delete
Name: ARREDONDO, ED
Address: 777 NW 72ND AVE STE 3D19
City-St-Zip: MIAMI, FL 33126

Title: PD () Delete
Name: CARROLL, TOM
Address: 777 NW 72ND AVE STE 3D19
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CARROLL, TOM
Address: 777 NW 72ND AVE STE 3098
City-St-Zip: MIAMI, FL 33126

Title: VD (X) Change () Addition
Name: GIESE, PAULETTE
Address: 777 NW 72ND AVE STE 3098
City-St-Zip: MIAMI, FL 33126

Title: TD (X) Change () Addition
Name: ARREDONDO, ED
Address: 777 NW 72ND AVE STE 3098
City-St-Zip: MIAMI, FL 33126

Title: CD (X) Change () Addition
Name: SHNIDER, BARRY
Address: 777 NW 72ND AVE STE 3098
City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOM CARROLL

PD

01/17/2006

Electronic Signature of Signing Officer or Director

Date