

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003194

FILED
Apr 15, 2009
Secretary of State

Entity Name: NAMIC-SOUTH FLORIDA, INC.

Current Principal Place of Business:

2501 SW 145TH AVE.,
SUITE 200
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

336 W. 37TH STREET
SUITE 302
NEW YORK, NY 10018

New Mailing Address:

FEI Number: 20-3117864 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MIRANDA SMITH, HELEN
Address: 2501 SW 145TH AVE., SUITE 200
City-St-Zip: MIRAMAR, FL 33027

Title: S () Delete
Name: RODRIGUEZ, LUCIA
Address: 2501 SW 145TH AVE.
City-St-Zip: MIRAMAR, FL 33027

Title: T () Delete
Name: BURKE, DWAYNE
Address: 18601 NW 2ND AVE
City-St-Zip: MIAMI, FL 33169

Title: VP () Delete
Name: NAVARRETE, ALLAN
Address: 420 LINCOLN ROAD - SUITE 506
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: HELEN MIRANDA SMITH

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date