

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K40726

FILED  
Mar 02, 2009  
Secretary of State

**Entity Name:** TO LIFE OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

19200 NE 25TH AVE  
V-322  
NORTH MIAMI BEACH, FL 331803213

**New Principal Place of Business:**

**Current Mailing Address:**

19200 NE 25TH AVE  
V-322  
NORTH MIAMI BEACH, FL 331803213

**New Mailing Address:**

**FEI Number:** 65-0088398      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FELDMAN, DAVID PA  
407 LINCOLN ROAD  
MIAMI BEACH, FL 33139 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ROSENFELD, NELSON,  
Address: 19200 NE 25TH AVE, V322  
City-St-Zip: NORTH MIAMI BCH, FL 33180

Title: D ( ) Delete  
Name: ROSENFELD, NELSON,  
Address: 19200 NE 25TH AVE  
City-St-Zip: NORTH MIAMI BCH, FL

Title: V ( ) Delete  
Name: ROSENFELD, NELSON,  
Address: 19200 NE 25 AVE  
City-St-Zip: NORTH MIAMI BCH, FL

**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:

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: NELSON ROSENFELD

D

03/02/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date