

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 24, 2007 8:00 am**  
**Secretary of State**

07-24-2007 90066 001 \*\*\*272.50

**DOCUMENT # N00000006415**

1. Entity Name  
**N.A.F.A. CONSULTANTS & EMPLOYMENTS AGENCY,  
CORP.**



Principal Place of Business  
**955 S.W. 122 AVENUE  
2ND FLOOR  
MIAMI, FL 33184**

Mailing Address  
**2 WEST MAIN STREET  
NAFA BUILDING  
AVON PARK, FL 33825**

**66020596**



2. Principal Place of Business - No P.O. Box #  
**9100 South Dadeland B!**

3. Mailing Address  
**4059 Santa Barbara Dr**

Suite, Apt. #, etc.  
**Suite 1500**

Suite, Apt. #, etc.  
**Harder HallCountry Club**

City & State  
**Miami, FL 33156**

City & State  
**Sebring, FL 33875**

Zip  
**33156**

Country

Zip  
**33875**

Country

07152007 Chg-NP CR2E037 (12/06)

4. FEI Number  
**65-1047467**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

## 6. Name and Address of Current Registered Agent

**PACHECKER, HUMPHREY H  
10008 WEST FLAGLER STREET  
B-126  
MIAMI, FL 33174**

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 signature required when reinstating)

DATE

**7/15/2007**

**Filing Fee is \$61.25  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

## 10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
BARRERA, TERESITA DJ  
955 S.W. 122 AVENUE, 2ND FLOOR  
MIAMI, FL 33184** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**President  
BARRERA, Teresita DJ  
10008 West Flagler ST.#B-126  
MIAMI, FL 33174** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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 with an address, with all other like empowered.

SIGNATURE:

**Teresita Barrera**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/15/2007 863-3850042**

Date

Daytime Phone #