

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02305

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: ASIAN-AMERICAN FEDERATION OF FLORIDA, INC.

**Current Principal Place of Business:**

8445 SW 148TH DRIVE  
MIAMI, FL 33158

**New Principal Place of Business:**

**Current Mailing Address:**

8445 SW 148TH DRIVE  
MIAMI, FL 33158

**New Mailing Address:**

FEI Number: 59-2406918

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DEL ROSARIO, ROSE MARIE  
8445 SW 148 DR  
MIAMI, FL 33158 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: C ( ) Delete  
Name: AGRAWAL, PIYUSH  
Address: 1625 EAGLE BEND  
City-St-Zip: WESTON, FL 33327

Title: VD ( ) Delete  
Name: BRUCE, JOYCE  
Address: 659 NE 125 STREET  
City-St-Zip: N MIAMI, FL 33161

Title: S ( ) Delete  
Name: GORDY, JOSEPHINE S  
Address: 8445 SW 148TH DRIVE  
City-St-Zip: MIAMI, FL 33158

Title: TD ( ) Delete  
Name: WHANG, SANG Y  
Address: 8445 SW 148 DR  
City-St-Zip: MIAMI, FL 33158

**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: PIYUSH AGRAWAL

C

03/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date