

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000154

FILED  
Feb 09, 2005  
Secretary of State

Entity Name: SOUTH FLORIDA ASA, INC.

## Current Principal Place of Business:

5201 S.W. 101ST TERRACE  
COOPER CITY, FL 333284949

## New Principal Place of Business:

## Current Mailing Address:

5201 S.W. 101ST TERRACE  
COOPER CITY, FL 333284949

## New Mailing Address:

FEI Number: 83-0350693

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

UHLER, MORIS L  
5201 S.W. 101ST TERRACE  
COOPER CITY, FL 333284949 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: STD ( ) Delete  
Name: UHLER, MORIS L  
Address: 5201 S.W. 101ST TERRACE  
City-St-Zip: COOPER CITY, FL 333284949

Title: PD ( ) Delete  
Name: POURIDAS, CHRIS  
Address: 14461 S.W. 150TH STREET  
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete  
Name: DUNBAR, MATT  
Address: 11815 S.W. 102ND COURT  
City-St-Zip: MIAMI, FL 33176

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition  
Name: SOBOL, MARTIN  
Address: 1002 S.W. 119TH AVENUE  
City-St-Zip: DAVIE, FL 33325

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

Title: D ( ) Change (X) Addition  
Name: FONTE, JOSE  
Address: 8802 N.W. 176TH LANE  
City-St-Zip: MIAMI, FL 33018

Title: D ( ) Change (X) Addition  
Name: CUADRA, FRANCISCO  
Address: 7489 WEST 32ND COURT  
City-St-Zip: HIALEAH, FL 33018

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MORIS L UHLER

STD

02/09/2005

Electronic Signature of Signing Officer or Director

Date