

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003579

FILED
Apr 30, 2007
Secretary of State

Entity Name: SOUTH FLORIDA ORGANIZATION OF CARIBBEAN ARTS, INC.

Current Principal Place of Business:

7456 PARKSIDE LANE
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

7456 PARKSIDE LANE
MARGATE, FL 33063

New Mailing Address:

FEI Number: 65-1284879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARRIS, MERVIN
7456 PARKSIDE LANE
MARGATE, FL 33063 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: HARRIS, MERVIN
Address: 7456 PARKSIDE LANE
City-St-Zip: MARGATE, FL 33063

Title: VP () Delete
Name: DILLON, FRANK
Address: 8825 RAMBLEWOOD BOULEVARD
City-St-Zip: CORAL SPRINGS, FL 33071

Title: SEC () Delete
Name: JOHNSON, CLEVE
Address: 10901 NW 29 MANOR
City-St-Zip: SUNRISE, FL 33322

Title: DIR () Delete
Name: ESDALLE, DANE
Address: 5010 NW 41 COURT
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: TD () Delete
Name: JACKSON, ROSALIE C
Address: 4882 SW 159TH AVE.
City-St-Zip: MIRAMAR, FL 33027

Title: SD () Delete
Name: JOSEPH, DONNA
Address: 3428 SPRING BLUFF PLACE
City-St-Zip: LAUDERHILL, FL 33319

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:

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: MERVIN HARRIS

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date