


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008 08:00 A
Secretary of State

DOCUMENT # N06000009682		
1. Entity Name USC ALUMNI ASSOCIATION OF SOUTH FLORIDA INC.		
Principal Place of Business 120 N.W. 131 STREET MIAMI, FL 33168	Mailing Address 120 N.W. 131 STREET MIAMI, FL 33168	



01082008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 77-0666545	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additions: Fee Required	

6. Name and Address of Current Registered Agent FERDINAND, KENNY 120 N.W. 131 STREET MIAMI, FL 33168	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

000000779867
01/11/08-80054-017 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALEXANDER, DESMOND 20154 N.W. 36 CT OPALOCKA, FL 33056
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ARCHER, JOSEPH 721 INDIANA AVE FT. LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ALEXANDER, MYRNA 20154 N.W. 36 CT OPALOCKA, FL 33056
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MAXI, LYDIA 960 N.W. 181 STREET MIAMI, FL 33177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FERDINAND, KENNY 120 N.W. 131 STREET MIAMI, FL 33168
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT CARRYL, JACKLYN 18353 FRESH LAKE WAY BOCA RATON, FL 33498

**DO NOT WRITE
IN THIS SPACE**

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: Kenny Ferdinand KENNY FERDINAND 01-09-08 305-332-8929
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #