

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006275

**FILED**  
**Mar 29, 2008**  
**Secretary of State**

**Entity Name:** PHILIPPINE AMERICAN FEDERATION OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

675 ROYAL PALM BEACH BLVD.  
SUITE 107  
ROYAL PALM BEACH, FL 33411 US

**Current Mailing Address:**

675 ROYAL PALM BEACH BLVD.  
SUITE 107  
ROYAL PALM BEACH, FL 33411 US

**New Principal Place of Business:**

675 ROYAL PALM BEACH BLVD.  
SUITE 103  
ROYAL PALM BEACH, FL 33411 US

**New Mailing Address:**

675 ROYAL PALM BEACH BLVD.  
SUITE 103  
ROYAL PALM BEACH, FL 33411 US

**FEI Number:** 65-0793909

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BOHOL, ERNEST S  
675 ROYAL PALM BEACH BLVD.  
SUITE 107  
ROYAL PALM BEACH, FL 33411 US

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

DOMINADO, EDWIN B  
675 ROYAL PALM BEACH BLVD.  
SUITE 103  
ROYAL PALM BEACH, FL 33411 US

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: EDWIN B. DOMINADO

03/29/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DOMINADO, EDWIN B  
Address: PO BOX 2863  
City-St-Zip: PALM BEACH, FL 33480

Title: S ( ) Delete  
Name: BOHOL, ERNEST S  
Address: 2188 BIG WOOD CAY  
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VP ( ) Delete  
Name: CADIZ, EDUARDO T  
Address: 19427 N. COQUINA WAY  
City-St-Zip: WESTON, FL 33332

Title: T ( ) Delete  
Name: MOYA, FLOR  
Address: 2275 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

Title: D ( ) Delete  
Name: BRUCE, JOCELYN H  
Address: 7601 EAST TREASURE DRIVE, #2001  
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: D ( ) Delete  
Name: TRINIDAD, BENNIE  
Address: 659 NE 125 ST  
City-St-Zip: NORTH MIAMI, FL 33161

**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: EDWIN B. DOMINADO

P

03/29/2008

Electronic Signature of Signing Officer or Director

Date