2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006275

FILED Feb 02, 2009 Secretary of State

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

Current Principal Place of Business:				New Principal Pla	New Principal Place of Business:		
SUITE 103	PALM BEACH						
ROYAL PA	LM BEACH, FL	33411	US				
Current Mailing Address:				New Mailing Addr	New Mailing Address:		
675 ROYAL PALM BEACH BLVD. SUITE 103 ROYAL PALM BEACH, FL 33411 US				P.O.BOX 2863 PALM BEACH, FL	P.O.BOX 2863 PALM BEACH, FL 33480 US		
FEI Number:	,			Number Not Applicable ()	Certificate of Status Desired (X)		
					` '		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
DOMINADO, EDWIN B 675 ROYAL PALM BEACH BLVD. SUITE 103							
	LM BEACH, FL	33411 L	JS				
The above in the State		ıbmits this	s statement for the purpos	se of changing its registe	ered office or registered agent, or both,		
SIGNATURE:							
	Electronic	Signatur	e of Registered Agent		Date		
OFFICERS AND DIRECTORS:				ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () DOMINADO, EDV PO BOX 2863 PALM BEACH, FI			Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	S ()E BOHOL, ERNEST 2188 BIG WOOD WEST PALM BEA	CAY	411	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () E CADIZ, EDUARD 19427 N. COQUII WESTON, FL 33	NA WAY		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T () E MOYA, FLOR 2275 BISCAYNE MIAMI, FL 3313			Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D ()E BRUCE, JOCELY 7601 EAST TREA NORTH BAY VILL	SURE DRI		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (X) I TRINIDAD, BENN 659 NE 125 ST NORTH MIAMI, F			Title: Name: Address: City-St-Zip:	() Change () Addition		

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 PRES 02/02/2009