

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 16, 2007  
Secretary of State**

DOCUMENT# N97000006381

Entity Name: SOUTH FLORIDA ECONOMIC EMPOWERMENT, INC

**Current Principal Place of Business:**

5555 NORTHWEST 95 AVENUE  
SUNRISE, FL 33351 US

**New Principal Place of Business:**

**Current Mailing Address:**

5555 NORTHWEST 95 AVENUE  
SUNRISE, FL 33351 US

**New Mailing Address:**

FEI Number: 65-0792593      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

FERNANDEZ, HENRY  
5555 NORTHWEST 95 AVENUE  
SUNRISE, FL 33351 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: PSD ( ) Delete  
Name: FERNANDEZ, HENRY  
Address: 5555 NORTHWEST 95 AVENUE  
City-St-Zip: SUNRISE, FL 33351

Title: D ( ) Delete  
Name: SAUNDERS, SHAWN  
Address: 3738 CONDOR COURT  
City-St-Zip: WESTON, FL 33331

Title: TD ( ) Delete  
Name: SIMS, EDDIE  
Address: 7951 SW 7TH CT  
City-St-Zip: N LAUDERDALE, FL 33068

Title: D ( ) Delete  
Name: HANKERSON, BRIAN  
Address: 8741 SW 14TH ST  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D ( ) Delete  
Name: PESSOA, PAUL  
Address: 15624 SOUTHWEST 53 COURT  
City-St-Zip: MIRAMAR, FL 33027

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: RICHARDS, ERIC  
Address: 9166 W ATLANTIC BLVD., #1622  
City-St-Zip: CORAL SPRINGS, FL 33071 US

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 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: BRIAN HANKERSON

D

03/16/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date