

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006343

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: MAFA, INC.

**Current Principal Place of Business:**

3504 DIANE DRIVE  
BOYNTON BEACH, FL 33435

**New Principal Place of Business:**

**Current Mailing Address:**

3504 DIANE DRIVE  
BOYNTON BEACH, FL 33435

**New Mailing Address:**

FEI Number: 65-0958499

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FISHMAN, GARY LLOYD  
3504 DIANE DRIVE  
BOYNTON BEACH, FL 33435 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: MR ( ) Delete  
Name: FISHMAN, GARY LLOYD  
Address: 3504 DIANE DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: MRS ( ) Delete  
Name: FISHMAN, LINDA ROCHETTE  
Address: 3504 DIANE DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: MR ( ) Delete  
Name: FISHMAN, SYDNEY  
Address: 7020 HALF MOON CIRCLE, #111  
City-St-Zip: HYPOLUXO, FL 33462

**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:

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: GARY LLOYD FISHMAN

MR.

04/30/2009

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

\_\_\_\_\_  
Date