

# **2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P01000092606

**FILED**  
**Oct 17, 2009**  
**Secretary of State**

**Entity Name:** SOUTH FLORIDA URBAN CONSULTANTS, INC.

**Current Principal Place of Business:**

9900 SW 168TH ST., STE.#11  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

9900 SW 168TH ST., STE.#11  
MIAMI, FL 33157

**New Mailing Address:**

**FEI Number:** 65-1158940

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COATS, MARK  
9900 SW 168 STREET, #11  
MIAMI, FL 33157 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: CEO ( ) Delete  
Name: COATS, MARK  
Address: 5910 SW 58TH TERRACE  
City-St-Zip: MIAMI, FL 33143

Title: S (X) Delete  
Name: COATS, PATRICK D  
Address: 1022 NE 35 AVE  
City-St-Zip: HOMESTEAD, FL 33033

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK COATS

CEO

10/17/2009

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

\_\_\_\_\_  
Date