

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111470

Entity Name: SFI-AMERICA, INC.

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

1535 NORTHPARK DRIVE
SUITE 103
WESTON, FL 33326

New Principal Place of Business:

1535 N PARK DRIVE
SUITE 103
WESTON, FL 33326

Current Mailing Address:

1535 NORTHPARK DRIVE
SUITE 103
WESTON, FL 33326

New Mailing Address:

1535 N PARK DRIVE
SUITE 103
WESTON, FL 33326

FEI Number: 36-4311754

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINZON, JAVIER PSTD
1535 NORTHPARK DR.
SUITE 103
WESTON, FL 33326 US

Name and Address of New Registered Agent:

PINZON, JAVIER PSTD
1535 N PARK DR.
SUITE 103
WESTON, FL 33326 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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: PINZON, JAVIER E PSTD
Address: 1535 N ORTHPARK DR. SUITE 103
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: PINZON, JAVIER E PSTD
Address: 1535 N PARK DR. SUITE 103
City-St-Zip: WESTON, FL 33326

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: JAVIER PINZON

PSDT

03/24/2009

Electronic Signature of Signing Officer or Director

Date