

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000115857

**FILED**  
**Mar 22, 2009**  
**Secretary of State**

**Entity Name:** BALAIS DEVELOPMENT OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

7416 SW 48 ST  
MIAMI, FL 33155

**New Principal Place of Business:**

8401 SW 19 ST  
NORTH LAUDERDALE, FL 33068

**Current Mailing Address:**

7416 SW 48 ST  
MIAMI, FL 33155

**New Mailing Address:**

8401 SW 19 ST  
NORTH LAUDERDALE, FL 33068

**FEI Number:** 90-0053480

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAL AIS, MIGUEL F  
7416 SW 48 ST  
MIAMI, FL 33155 US

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

BAL AIS, MIGUEL F  
P. O. BOX 164209  
MIAMI, FL 33116 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:**

03/22/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BAL AIS, MIGUEL F  
Address: 7416 SW 48 ST  
City-St-Zip: MIAMI, FL 33155

Title: VP ( ) Delete  
Name: TURIN, HOWARD F  
Address: 7416 SW 48 ST  
City-St-Zip: MIAMI, FL 33155

Title: TS ( ) Delete  
Name: WRIGHT, ROSANNE  
Address: 8401 SW 19 ST  
City-St-Zip: POMPANO BEACH, FL 33068

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

Title: PD (X) Change ( ) Addition  
Name: BAL AIS, MIGUEL F  
Address: P. O. BOX 164209  
City-St-Zip: MIAMI, FL 33116

Title: VP (X) Change ( ) Addition  
Name: TURIN, HOWARD F  
Address: 10551 NW 41 ST  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TS (X) Change ( ) Addition  
Name: WRIGHT, ROSANNE  
Address: 8401 SW 19 ST  
City-St-Zip: NORTH LAUDERDALE, FL 33068

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:** ROSANNE WRIGHT

TS

03/22/2009

Electronic Signature of Signing Officer or Director

Date