## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**SIGNATURE:** 

## Apr 23, 2007 08:00 Al Secretary of State DOCUMENT # P04000006034 1. Entity Name SOUTH DADE INC. Principal Place of Business Mailing Address 9010 SW 196 DRIVE 9010 SW 196 DRIVE MAM, FL 33157 MAM, FL 33157 CR2E034 (11/05) 04172007 No Chq-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0577468 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MACDOUGALL, ROBERT W DO NOT WRITE 9010 SW 196 DR. MIAMI,, FL 33157 IN THIS SPACE 8. The above nar ent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations (NOTE: Registered Agent signature required when reinstating 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PT TITLE NAME MACDOUGALL, ROBERT W 9010 SW 196 DR. STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33157 000000725643 05/03/07-80030-017 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-S1-7P TITLE STREET ADDRESS 12. I hereby certify that the information sindicated on this report or supplierned of the corporation or the receiver of the corporation or the receiver of the corporation or an attachment with a does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

**FILED**