

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000121163

FILED
Jan 11, 2005
Secretary of State

Entity Name: CONTRACT ADMINISTRATORS OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

815 NW 57TH AVE SUITE 405
MIAMI, FL 33126

New Principal Place of Business:

815 NW 57TH AVE
SUITE 405
MIAMI, FL 33126

Current Mailing Address:

815 NW 57TH AVE SUITE 405
MIAMI, FL 33126

New Mailing Address:

815 NW 57TH AVE
SUITE 405
MIAMI, FL 33126

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ESPINOSA, PATRICIA O ESQ
815 NW 57TH AVE SUITE 405
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

ESPINOSA, PATRICIA O ESQ
815 NW 57TH AVE
SUITE 405
MIAMI, FL 33126 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: _____ 01/11/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: ESPINOSA, PATRICIA O
Address: 815 NW 57TH AVE SUITE 405
City-St-Zip: MIAMI, FL 33126

Title: DVT () Delete
Name: PENABAD, NIVIO
Address: 815 NW 57TH AVE SUITE 405
City-St-Zip: MIAMI, FL 33126

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 for the exemption stated in Section 119.07(3)(i), 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: PATRICIA O. ESPINOSA DPS 01/11/2005
Electronic Signature of Signing Officer or Director Date