

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000023891

FILED
May 01, 2007
Secretary of State

Entity Name: SOUTH DADE PROFESSIONALS, INC.

Current Principal Place of Business:

6400 SW 43 STREET
MIAMI, FL 33155 US

New Principal Place of Business:

406 SW 1 STREET
FLORIDA CITY, FL 33034 US

Current Mailing Address:

6400 SW 43 STREET
MIAMI, FL 33155 US

New Mailing Address:

406 SW 1 STREET
FLORIDA CITY, FL 33034 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESA, CARIDAD
6400 SW 43 STREET
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

MESA, TOMAS
406 SW 1 STREET
FLORIDA CITY, FL 33034 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: TOMAS MESA

05/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MESA, CARIDAD
Address: 6400 SW 43 STREET
City-St-Zip: MIAMI, FL 33155 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MESA, TOMAS
Address: 406 SW 1 STREET
City-St-Zip: FLORIDA CITY, FL 33034 US

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: TOMAS MESA

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date