

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032815

Entity Name: B.F. PROPERTIES, INC.

FILED  
Mar 12, 2009  
Secretary of State

## Current Principal Place of Business:

524 S. ANDREWS AVENUE  
SUITE 101N  
FORT LAUDERDALE, FL 33301

## New Principal Place of Business:

## Current Mailing Address:

524 S. ANDREWS AVENUE  
SUITE 101N  
FORT LAUDERDALE, FL 33301

## New Mailing Address:

FEI Number: 20-2984565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BORTOLIN, SONIA M ESQ.  
524 S. ANDREWS AVENUE  
SUITE 101N  
FORT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P, T ( ) Delete  
Name: BORTOLIN, EDGAR O  
Address: 2025 NE 164 STREET, # 409  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VP, S ( ) Delete  
Name: BORTOLIN, SONIA M  
Address: 2025 NE 164 STREET, #409  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D ( ) Delete  
Name: BORTOLIN, ERNESTO  
Address: 2025 NE 164 STREET, #409  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D ( ) Delete  
Name: BORTOLIN, GATONE E  
Address: 2025 NE 164 STREET, #409  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D ( ) Delete  
Name: BORTOLIN, CAROL P  
Address: 2025 NE 164 STREET, #409  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D ( ) Delete  
Name: BORTOLIN, GINA  
Address: 2025 NE 164 STREET, #409  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: EDGAR BORTOLIN

PT

03/12/2009

Electronic Signature of Signing Officer or Director

Date