2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000042381

Address:

City-St-Zip:

2280 SW 32 AVE. #401

MIAMI, FL 33149

FILED Apr 30, 2008 Secretary of State

Entity Na	me: SOUTH F	FLORIDA SOURCES CORP.					
Current Principal Place of Business:				New Principal Place of Business:			
2280 SW 32 AVE.				199 OCERAN LANE DRIVE			
401 МІАМІ, FL 33134				314 KEY BISCAYNE, FL 33149 US			
Current Mailing Address:				New Mailing Address:			
2280 SW 32 AVE.				199 OCEAN LANE DRIVE			
401 МІАМІ, FL 33134				314 KEY BISCAYNE, FL 33149 US			
FEI Number	r:	FEI Number Applied For ()	FEI Numbe	r Not Applicable (X)	Certifica	te of Status Desir	red ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
199 OCEA 314	ARIA, CARLOS AN LANE DR. CAYNE, FL 331						
	e named entity s e of Florida.	submits this statement for the	purpose of ch	nanging its registere	ed office or re	egistered agent	t, or both,
SIGNATU	RE:						
	Electron	ic Signature of Registered A	gent		ĺ	Date	
Election Ca	mpaign Financing	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	SANCHEZ, DÌÉ 2280 SW 32 AV	/E #401	Ad	me: SANCHEZ, dress: 199 OCEA	(X) Change(DIEGO N LANE DRIVE AYNE, FL 3314	#314	
Title: Name:	S () MARTIN, MARIA	Delete A ASUNCION	Titi Na		(X) Change(IARIA ASUNCIO		

Address:

City-St-Zip:

199 OCEAN LANE DRIVE #314

KEY BISCAYNE, FL 33149

Title: Title: () Change (X) Addition () Delete Name: Name: SANCHEZ, SEVERINO EXE DIR 199 OCEAN LANE DRIVE #314 Address: Address: City-St-Zip: City-St-Zip: KEY BISCAYNE, FL 33149

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: SEVERINO SANCHEZ EX D 04/30/2008