

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000053162

FILED
Jan 22, 2009
Secretary of State

Entity Name: SOUTH POINT ASSET MANAGEMENT, INC.

Current Principal Place of Business:

1 CENTURY LANE
P.O. #302
MIAMI BEACH, FL 33139

New Principal Place of Business:

1784 WEST AVE
NO 3
MIAMI BEACH, FL 33139

Current Mailing Address:

1 CENTURY LANE
P.O. #302
MIAMI BEACH, FL 33139

New Mailing Address:

1784 WEST AVE
NO 3
MIAMI BEACH, FL 33139

FEI Number: 59-3814818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SORDI, ERMANNIO
1 CENTURY LANE
P.O. #302
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

SORDI, ERMANNIO
1784 WEST AVE
NO 3
MIAMI BEACH, FL 33139 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:

01/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: SORDI, ERMANNIO
Address: 1 CENTURY LANE, P.O. #302
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP () Delete
Name: GIRALDO, MONICA
Address: 1 CENTURY LANE, P.O. #302
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SORDI, ERMANNIO
Address: 1784 WEST AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP (X) Change () Addition
Name: GIRALDO, MONICA
Address: 1784 WEST AVE
City-St-Zip: MIAMI BEACH, FL 33139

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: MONICA GIRALDO

VP

01/22/2009

Electronic Signature of Signing Officer or Director

Date