

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000071073

FILED  
Feb 17, 2009  
Secretary of State

Entity Name: GENESIS ENTERPRISES OF SOUTH FLORIDA INC

**Current Principal Place of Business:**

7725 SW 142ND STREET  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 562901  
MIAMI, FL 33256

**New Mailing Address:**

FEI Number: 20-2484217

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ABERCROMBIE ACCOUNTING INC.  
16115 SW 117TH AVENUE #25  
MIAMI, FL 33177 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: PSD ( ) Delete  
Name: OQUENDO, MARIA V  
Address: 7725 SW 142ND STREET  
City-St-Zip: PALMETTO BAY, FL 33158

Title: VPTD ( ) Delete  
Name: PACHCCO, LEGIA K  
Address: 14217 SW 91ST STREET  
City-St-Zip: MIAMI, FL 33186

**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 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: MARIA OQUENDO

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02/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date