

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000069742

FILED
Mar 31, 2009
Secretary of State

Entity Name: CHERFA FINANCIAL SERVICES INC.

Current Principal Place of Business:

3311 CLEVELAND AVE
FORT MYERS, FL 33901

New Principal Place of Business:

3324 CLEVELAND AVE
FORT MYERS, FL 33901

Current Mailing Address:

722 NW 18TH PLACE
CAPE CORAL, FL 33993

New Mailing Address:

3324 CLEVELAND AVE
FORT MYERS, FL 33901

FEI Number: 72-1616830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAFALAISE, JUNIOR
722 NW 18TH PLACE
CAPE CORAL, FL 33993 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: PD () Delete
Name: LAFALAISE, JUNIOR F
Address: 722 NW 18TH PLACE
City-St-Zip: CAPE CORAL, FL 33993

Title: VP () Delete
Name: CHERY-LAFALAISE, GUERLING
Address: 722 NW 18TH PLACE
City-St-Zip: CAPE CORAL, FL 33993

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: JUNIOR F. LAFALAISE

PRES

03/31/2009

Electronic Signature of Signing Officer or Director

Date