

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000157112

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** SOUTH FLORIDA GOLINE, INC.

**Current Principal Place of Business:**

5245 NW 36TH ST  
215  
MIAMI SPRINGS, FL 33166 US

**New Principal Place of Business:**

**Current Mailing Address:**

5245 NW 36TH ST  
215  
MIAMI SPRINGS, FL 33166 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

RIVERO, RITA  
5245 NW 36TH STREET, 215  
MIAMI SPRINGS, FL 33166 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

**OFFICERS AND DIRECTORS:**

Title:                      DIR  
Name:                      RIVERO, RITA  
Address:                      5245 NW 36TH ST 215  
City-St-Zip:                      MIAMI SPRINGS, FL 33166 US

Title:                      DIR  
Name:                      ANSOATEGUI, JOHN  
Address:                      5245 NW 36TH ST 215  
City-St-Zip:                      MIAMI SPRINGS, FL 33166

I hereby 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 all other like empowered.

SIGNATURE: RITA RIVERO

DIR

04/27/2012

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

\_\_\_\_\_ Date