# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Aug 31, 2009**
**Secretary of State**

DOCUMENT# P07000092584

**Entity Name:** SOUTH FLORIDA BUSINESS PARTNERSHIP, INC.

**Current Principal Place of Business:**

1820 N. CORPORATE LAKES BLVD., STE. 102
WESTON, FL 33326

**New Principal Place of Business:**

144 DOCKSIDE CIR
WESTON, FL 33327

**Current Mailing Address:**

1820 N. CORPORATE LAKES BLVD., STE. 102
WESTON, FL 33326

**New Mailing Address:**

144 DOCKSIDE CIR
WESTON, FL 33327

**FEI Number: 42-1738232** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

ROTMAN, JEFFREY R.
1820 N. CORPORATE LAKES BLVD., STE. 102
WESTON, FL 33326 US

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

ROTMAN, CLAUDIA M
144 DOCKSIDE CIR
WESTON, FL 33327 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: CLAUDIA ROTMAN 08/31/2009
Electronic Signature of Registered Agent Date

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: ROTMAN, JEFFREY R.
Address: 1820 N. CORPORATE LAKES BLVD., STE. 102
City-St-Zip: WESTON, FL 33326

Title: DIR (X) Delete
Name: COHEN, JULIE
Address: 881 SUNFLOWER CIRCLE
City-St-Zip: WESTON, FL 33327

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: ROTMAN, CLAUDIA M
Address: 144 DOCKSIDE CIR
City-St-Zip: WESTON, FL 33327

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: CLAUDIA ROTMAN P 08/31/2009
Electronic Signature of Signing Officer or Director Date