

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000050325

FILED
May 06, 2009
Secretary of State

Entity Name: SOFLO ROF INC.

Current Principal Place of Business:

13781 NW 19TH STREET
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

13781 NW 19TH STREET
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: 32-0255208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEINBERG, STEPHANINA
12368 SW 127TH AVENUE
MIAMI, FL 33186 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

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: D () Delete
Name: FEINBERG, STEPHANINA
Address: 12368 SW 127TH AVENUE
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: LUBOWICZ, NESTOR
Address: 13781 NW 19TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D () Delete
Name: GOODMAN, XIOMARA
Address: 9605 NW 41ST STREET
City-St-Zip: DORAL, FL 33178

Title: D () Delete
Name: RUBINSZTAIN, SYLVIA
Address: 1927 N PINE ISLAND ROAD
City-St-Zip: PLANTATION, FL 33322

Title: D () Delete
Name: GREENBERG, MITCH
Address: 5130 LINTON BLVD. #H1
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: SOTTILE, ROBERT
Address: 10359 ROYAL PALM BLVD.
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NESTOR LUBOWICZ

D

05/06/2009

Electronic Signature of Signing Officer or Director

Date