

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000104596

**FILED**  
**Jun 15, 2010**  
**Secretary of State**

**Entity Name:** FAITH FINANCIAL OF SOUTH FLORIDA INC.

**Current Principal Place of Business:**

7478 NW 179 TERRACE  
MIAMI LAKES, FL 33015

**New Principal Place of Business:**

8013 WEST 36 AVE # 5  
HIALEAH, FL 33018

**Current Mailing Address:**

7478 NW 179 TERRACE  
MIAMI LAKES, FL 33015

**New Mailing Address:**

8013 WEST 36 AVE # 5  
HIALEAH, FL 33018

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GOMEZ, ILBANIA  
7478 NW 179 TERRACE  
MIAMI LAKES, FL 33015 US

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

GOMEZ, ILBANIA  
8013 WEST 36 AVE # 5  
HIALEAH, FL 33018 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

06/15/2010

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GOMEZ, ILBANIA  
Address: 8013 WEST 36 AVE # 5  
City-St-Zip: HIALEAH, FL 33018

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: ILBANIA GOMEZ

PD

06/15/2010

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

\_\_\_\_\_  
Date