

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000007781

FILED
Jul 06, 2009
Secretary of State

Entity Name: SOUTH FLORIDA AQUACULTURE, INC.

Current Principal Place of Business:

409 BREVARD AVENUE
SUITE 7
COCOA, FL 32922

Current Mailing Address:

P.O. BOX 307
COCOA, FL 32923

New Principal Place of Business:

815 N. HOMESTEAD BLVD
SUITE 410
HOMESTEAD, FL 33030

New Mailing Address:

815 N. HOMESTEAD BLVD
SUITE 410
HOMESTEAD, FL 33030

FEI Number: 65-0634443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CF CONSULTING, LLC
409 BREVARD AVENUE
SUITE 7
COCOA, FL 32922 US

Name and Address of New Registered Agent:

JOUBERT, MICHAEL
815 N. HOMESTEAD BLVD.
SUITE 410
HOMESTEAD, FL 33030 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: MICHAEL JOUBERT

07/06/2009

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: DST () Delete
Name: PAPADOYIANIS, ERNEST D
Address: 21218 ST. ANDREWS BOULEVARD, SUITE 645
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: CHERCH, XAVIER
Address: 14545 J MILITARY TRAIL, # 167
City-St-Zip: DELRAY BEACH, FL 33484

Title: P, D (X) Delete
Name: HIPPLE, ROBERT
Address: 409 BREVARD AVENUE, #7
City-St-Zip: COCOA, FL 32922

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CARBONE, STEVE
Address: 815 N. HOMESTEAD BLVD., SUITE 410
City-St-Zip: HOMESTEAD, FL 33030

Title: D (X) Change () Addition
Name: JOUBERT, MICHAEL
Address: 815 N. HOMESTEAD BLVD., SUITE 410
City-St-Zip: HOMESTEAD, FL 33030

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: STEVE CARBONE

D

07/06/2009

Electronic Signature of Signing Officer or Director

Date