

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000032683

1. Corporation Name
SOUTH FLORIDA RESOURCES, INC.

Principal Place of Business
1032 LIDO COURT
FORT LAUDERDALE FL 33326

Mailing Address
1032 LIDO COURT
FORT LAUDERDALE FL 33326

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90095 047 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/08/1998

4. FEI Number
65-0825998
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24
25
29
30
9. Name and Address of Current Registered Agent
CLASEN, MARK E
1032 LIDO COURT
FORT LAUDERDALE FL 33326

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME LABRADO, REUBEN M
STREET ADDRESS 11832 S.W. 99TH STREET
CITY-ST-ZIP MIAMI FL 33186

TITLE D ☐ DELETE
NAME CLASEN, MARK E
STREET ADDRESS 1032 LIDO COURT
CITY-ST-ZIP FORT LAUDERDALE FL 33326

TITLE PRESIDENT & DIRECTOR ☐ DELETE
NAME ARMANDO ESCOBAR
STREET ADDRESS 15731 SW 46TH ST.
CITY-ST-ZIP MIAMI, FL 33185

TITLE VICE PRESIDENT & DIRECTOR ☐ DELETE
NAME JACOB LEHTIO
STREET ADDRESS 13030 SW 117TH ST.
CITY-ST-ZIP MIAMI, FL 33186

TITLE VICE PRESIDENT & DIRECTOR ☐ DELETE
NAME MARTIN UREA
STREET ADDRESS 13341 SW 60TH TERRACE
CITY-ST-ZIP MIAMI, FL 33183

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VICE PRESIDENT & DIRECTOR ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE SECRETARY/TREASURER & DIRECTOR ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/22/99 (954) 384-6217

CR2E034 (1/98)