

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000031017

**Entity Name:** SOUTH ATLANTIC FINANCIAL SERVICES CORP.

**Current Principal Place of Business:**

5901 SW 74 STREET  
# 207  
MIAMI, FL 33143

**Current Mailing Address:**

5901 SW 74 STREET  
# 207  
MIAMI, FL 33143 US

**FEI Number:** 65-0574856

**Certificate of Status Desired:** No

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

ROSABAL, JORGE  
5901 SW 74 STREET  
# 207  
MIAMI, FL 33143 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

|                 |                         |                 |                         |
|-----------------|-------------------------|-----------------|-------------------------|
| Title           | CDPT                    | Title           | VS                      |
| Name            | ROSABAL, JORGE L        | Name            | ROSABAL, JORGE          |
| Address         | 5901 SW 74 STREET # 207 | Address         | 5901 SW 74 STREET # 207 |
| City-State-Zip: | MIAMI FL 33143          | City-State-Zip: | MIAMI FL 33143          |

*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:** JORGE ROSABAL

**PRESIDENT**

**03/29/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date