

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N0000000805

1. Entity Name

HARDBALL BASEBALL LEAGUE, INC.

Principal Place of Business

**3101 SW 79TH COURT
MIAMI FL 33155**

Mailing Address

**3101 SW 79TH COURT
MIAMI FL 33155**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

FILED

01 SEP 25 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



0007509

6. Name and Address of Current Registered Agent

**OTERO, JORGE E
75 VALENCIA AVENUE
4TH FLOOR
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D TOSAR, MIKE	3101 SW 79TH COURT	MIAMI FL 33155	<input type="checkbox"/>
D COLLAZO, LAZARO	3101 SW 79TH COURT	MIAMI FL 33155	<input type="checkbox"/>
D TOSAR, MARIA	3101 SW 79TH COURT	MIAMI FL 33155	<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
800004614168--7	-09/27/01--01081--012	*****61.25 *****61.25	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **MICHAEL M. [Signature]**

9-8-01

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CR2E037 (5/01)