## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000005843

Entity Name: MIAMI CORAL PARK WRESTLING BOOSTER CLUB, INC.

Apr 22, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1108 PONCE DE LEON BLVD. 7440 SW 107TH AVE. CORAL GABLES, FL 33134

APT. 8208

MIAMI, FL 33173

**Current Mailing Address: New Mailing Address:** 

1108 PONCE DE LEON BLVD. 7440 SW 107TH AVE. CORAL GABLES, FL 33134

APT. 8208 MIAMI, FL 33173

FEI Number: 65-0952336 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ABDMISHANI, AMIR M FORS, ANA 1108 PONCE DE LEON BLVD. 7440 SW 107TH AVE. 8208

CORAL GABLES, FL 33134 MIAMI, FL 33173

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: AMIR MANUEL ABDMISHANI 04/22/2004

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete VAZQUEZ, LEIDY ABDMISHANI, AMIR M Name: Name:

3525 NW 2ND TERRACE Address: 7440 SW 107TH AVE. APT. 8208 Address:

MIAMI, FL 33125 MIAMI, FL 33173 City-St-Zip: City-St-Zip:

Title: VSTD ( ) Delete Title: (X) Change ( ) Addition

Name: FORS, ANA Name: ROMERO, MARIA P Address: 1108 PONCE DE LEON BLVD. Address: 3500 SW 111 AVE. City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33165

Title: () Delete Title: (X) Change ( ) Addition

ROMERO, MARIA P Name: FLORES, ANA P Name: Address: 3500 SW 111 AVE Address: 14330 SW 168 TERR. City-St-Zip: MIAMI, FL 33165 City-St-Zip: MIAMI, FL 33177

Title: () Delete Title: ( ) Change (X) Addition

Name: Name: AEDU. HECTOR 7930 SW 23RD ST. Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33155

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMIR MANUEL ABDMISHANI PD 04/22/2004