
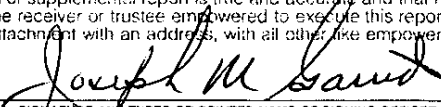


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 18, 2008 8:00 am**  
**Secretary of State**

04-18-2008 90031 033 \*\*\*150.00

<b>DOCUMENT # J70391</b> 1. Entity Name <b>CHAMPIONSHIP PROMOTIONS, INC.</b>																																																																																																																																																					
Principal Place of Business <b>6310 2ND ST, STOCK ISLAND KEY WEST FL 33040</b>			Mailing Address <b>212 KEY HAVEN ROAD KEY WEST FL 33040</b>																																																																																																																																																		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address																																																																																																																																																			
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																																																			
City & State		City & State																																																																																																																																																			
Zip	Country	Zip	Country																																																																																																																																																		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent																																																																																																																																																	
<b>GARRIDO, JOSEPH M 212 KEY HAVEN RD KEY WEST FL 33040</b>				Name																																																																																																																																																	
				Street Address (P.O. Box Number is Not Acceptable)																																																																																																																																																	
				City <span style="float: right;"><b>FL</b></span> Zip Code																																																																																																																																																	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or corp. in the State of Florida. I am familiar with, and accept the obligations of registered agent.																																																																																																																																																					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when contributing.)</small>																																																																																																																																																					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																																																																																																																																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="padding: 5px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="padding: 5px;">11. 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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 607, 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.																																																																																																																																																					
<b>SIGNATURE:</b>  <span style="float: right;">4.1.03 305-293-3435</span>																																																																																																																																																					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																																																					



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4.1.03

305-293-3435