2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2005
Secretary of State

DOCUMENT# N00000000863

Entity Name: ALL AMERICAN VOLLEYBALL, INC.

Current Principal Place of Business:

10397 SLEEPY BROOK WAY
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

10397 SLEEPY BROOK WAY
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 65-1028566 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FARAH, MICHAEL
10397 SLEEPY BROOK WAY
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LOEWENTHAL, CONNIE
Address: 5237 N.W. 33RD AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D ( ) Delete
Name: LOEWENTHAL, RONALD
Address: 5237 N.W. 33RD AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D ( ) Delete
Name: FARAH, MICHAEL
Address: 10397 SLEEPY BROOK WAY
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FARAH, JOANNE
Address: 10397 SLEEPY BROOK WAY
City-St-Zip: BOCA RATON, FL 33428

Title: D (X) Change ( ) Addition
Name: LOEWENTHAL, CONNIE
Address: 5237 N.W. 33RD AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MICHAEL J FARAH D 08/09/2005

Electronic Signature of Signing Officer or Director — Date