

**2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N00000001042

**FILED**  
**Oct 21, 2006**  
**Secretary of State****Entity Name:** BUTLER BASKETBALL SCHOOL, INC.**Current Principal Place of Business:**14050 BISCAYNE BLVD.  
103  
MIAMI, FL 33181**New Principal Place of Business:**1805 SANS SOUCI BOULEVARD  
SUITE 116  
MIAMI, FL 33181**Current Mailing Address:**P.O. BOX 561523  
MIAMI, FL 33256**New Mailing Address:**1805 SANS SOUCI BOULEVARD  
SUITE 116  
MIAMI, FL 33181**FEI Number:** 65-1003970      **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:**BUTLER, JAKE  
15391 S. DIXIE HWY  
SUITE 60  
MIAMI, FL 33157 US**Name and Address of New Registered Agent:**BUTLER, JAKE  
1805 SANS SOUCI BOULEVARD  
SUITE 116  
MIAMI, FL 33157 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: JAKE BUTLER

10/21/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PD      ( ) Delete  
**Name:** BUTLER, JAKE R  
**Address:** 15391 S. DIXIE HWY -SUITE 60  
**City-St-Zip:** MIAMI, FL 33157**Title:** VPD      (X) Delete  
**Name:** HENNE, JILL  
**Address:** 8255 S.W. 152 AVENUE, APT. 412  
**City-St-Zip:** MIAMI, FL 33193**Title:** T      ( ) Delete  
**Name:** BUTLER, KAMLA  
**Address:** 11704 S.W. 125 COURT  
**City-St-Zip:** MIAMI, FL 33186**Title:** S      (X) Delete  
**Name:** BOODHOE, TRACY  
**Address:** 11434 S.W. 112TH AVENUE  
**City-St-Zip:** MIAMI, FL 33186**Title:** M      ( ) Delete  
**Name:** PEARSONS, LORENZO III  
**Address:** 15391 S. DIXIE HWY - SUITE 60  
**City-St-Zip:** MIAMI, FL 33157**Title:** C      ( ) Delete  
**Name:** CUEVAS, ERIC  
**Address:** 15391 S. DIXIE HWY -SUITE 60  
**City-St-Zip:** MIAMI, FL 33157**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD      (X) Change ( ) Addition  
**Name:** BUTLER, JAKE R  
**Address:** 1805 SANS SOUCI BOULEVARD  
**City-St-Zip:** MIAMI, FL 33181**Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** M      (X) Change ( ) Addition  
**Name:** BUTLER, KAMLA  
**Address:** 11704 S.W. 125 COURT  
**City-St-Zip:** MIAMI, FL 33186**Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****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 Chapter 119, 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: JAKE BUTLER

PD

10/21/2006

Electronic Signature of Signing Officer or Director

Date