

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003250

FILED  
Apr 13, 2012  
Secretary of State

**Entity Name:** MIAMI-DADE EXTREME YOUTH FOOTBALL LEAGUE, INC.

**Current Principal Place of Business:**

600 GRAPETREE DRIVE  
8 GN  
KEY BISCAVNE, FL 330149

**New Principal Place of Business:**

600 GRAPETREE DRIVE  
8 GN  
KEY BISCAVNE, FL 33149

**Current Mailing Address:**

600 GRAPETREE DRIVE  
8 GN  
KEY BISCAVNE, FL 330149

**New Mailing Address:**

600 GRAPETREE DRIVE  
8 GN  
KEY BISCAVNE, FL 33149

**FEI Number:** 65-1015807

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZAYAS, ALFREDO  
600 GRAPETREE DRIVE  
APT 8 GN  
KEY BISCAVNE, FL 33149 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: PRE  
Name: MARTINEZ, DANIEL  
Address: 825 GRANADA GROVE CT  
City-St-Zip: CORAL GABLES, FL 33134

Title: TRES  
Name: CHACON, GUILLERMO M  
Address: 2520 SW 22 STREET, SUITE: 2309  
City-St-Zip: MIAMI, FL 33145

Title: VPS  
Name: PINTADO, MIKE  
Address: 11521 SW 143 COURT  
City-St-Zip: MIAMI, FL 33186

Title: SEC  
Name: ZAYAS, ALFREDO V  
Address: 600 GRAPETREE DRIVE APT 8 GN  
City-St-Zip: KEY BISCAVNE, FL 33149

Title: VPN  
Name: PALACIO, JESUS  
Address: 5300 NW 102 AVE  
City-St-Zip: DORAL, FL 33174

Title: EVP  
Name: RAPHAEL, RICHARD  
Address: PO BOX 640706  
City-St-Zip: NORTH MIAMI BEACH, FL 33164

I hereby 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 all other like empowered.

SIGNATURE: GUILLERMO M. CHACON

TRE

04/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date