

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 31, 2005 8:00 am**  
**Secretary of State**

01-31-2005 90056 050 \*\*\*\*70.00

**DOCUMENT # N00000004265**

1. Entity Name

ELIM SPORTS PROGRAM, INC.



Principal Place of Business

5800 S.W. 90TH COURT  
MIAMI FL 33173

Mailing Address

5800 S.W. 90TH COURT  
MIAMI FL 33173

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1023995

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOLLEDA, CONRADO  
5800 S.W. 90TH COURT  
MIAMI FL 33173

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME MOLLEDA, CONRADO  
STREET ADDRESS 5800 S.W. 90TH COURT  
CITY-ST-ZIP MIAMI FL 33173

TITLE ☐ Change ☒ Addition  
NAME VOCAL  
STREET ADDRESS LUCILLE FAUST  
CITY-ST-ZIP 10115 E. CALUSA CLUB DRIVE  
MIAMI, FL 33186

TITLE VTD ☐ Delete  
NAME MOLLEDA, ELSA  
STREET ADDRESS 5800 S.W. 90TH COURT  
CITY-ST-ZIP MIAMI FL 33173

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME RODRIGUEZ, TEODORO  
STREET ADDRESS 7260 SW 138 CT  
CITY-ST-ZIP MIAMI FL 33183

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD ☐ Delete  
NAME RIVERA, EDWIN JR  
STREET ADDRESS 6110 SW 33 ST  
CITY-ST-ZIP MIAMI FL 33155

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V ☐ Delete  
NAME ESTRADA, MARIO DANIEL  
STREET ADDRESS 11515 SW 172 TER  
CITY-ST-ZIP MIAMI FL 33157

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V ☐ Delete  
NAME PEREZ, RUBEN  
STREET ADDRESS 3501 SW 127 CT.  
CITY-ST-ZIP MIAMI FL 33175

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Conrado Mollada  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-24-2005 305-491-5648

Date Daytime Phone #