## APPROXE AND 2006 NOT-FOR-PROFIT CORPORATION FILED AMENDED ANNUAL REPORT DOCUMENT # N00000004950 06 SEP -7 AMM: 15 1. Entity Name EAGLES BASEBALL BOOSTERS, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 11470 SW 56TH STREET 11470 SW 56TH STREET MIAMI, FL 33165 MIAMI, FL 33165 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08182006 CR2E037 (4/06) Chg-NP 4. FEI Number 65-1031961 City & State City & State Applied For Not Applicable Country Zip Country Zip \$8.75 Additional 5.-Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RODRIGUEZ, G PASTOR Street Address (P.O. Box Number is Not Acceptable) 11470 SW 56TH STREET MÍAMI, FL 33165 City 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 9. Election Campaign Financing \$5.00 May Be Make check payable to Amended AR is \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Defete TITLE Treasurer RODRIGUEZ, G PASTOR NAME NAME Sandra Rodriguez STREET ADDRESS 11470 SW 56TH STREET STREET ADDRESS 1201 SW 97th Ct., Miami, FL 33174 CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33165 VP ☐ Delete Secretary ☐ Change X Addition TITLE TITLE VALDES, JESUS NAME NAME 'Rosa Zaldivar STREET ADDRESS 9530 SW 44TH ST STREET ADDRESS 14100 SW 47th Street CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33165 Miami. Florida 33175 000079732홍2번 <sup>0</sup> 03/12/06--01064--036 \*\*61.25 Delete TITLE TITLE ■ Addition PEREZ, NURY NAME NAME 3310 SW 88TH PLACE STREET ADDRESS STREET ADDRESS MIAMI, FL 33165 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition OCHOA, LOURDES NAME NAME STREET ADDRESS 10321 SW 27 ST STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33165 CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-72P CITY-ST-7IP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

Pastor G. Rodriguez President 8/21/06 (305) 205-0033 Kodrages SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

SIGNATURE: