

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007118

FILED
May 20, 2005
Secretary of State

Entity Name: METRO AQUATIC CLUB OF MIAMI INC.

Current Principal Place of Business:

13378 S.W. 144 TERRACE
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

PO BOX 770876
MIAMI, FL 33186

New Mailing Address:

PO BOX 770876
MIAMI, FL 33177

FEI Number: 65-1052790 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:

PEPPAS, KIRK
13378 S.W. 144 TERRACE
MIAMI, FL 33186 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: PD () Delete
Name: PEPPAS, KIRK
Address: 13378 S.W. 144 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: VPD () Delete
Name: DEVINE, STEPHANIE
Address: 10000 S.W. 198 STREET
City-St-Zip: MIAMI, FL 33157

Title: SD () Delete
Name: PEREZ, PHELLICIA
Address: 14875 S.W. 212 STREET
City-St-Zip: MIAMI, FL 33187

Title: D () Delete
Name: RODRIGUEZ, JULIETTA
Address: 13378 SW 144 TERR
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: KIRK PEPPAS

PD

05/20/2005

Electronic Signature of Signing Officer or Director

Date