## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000007812

Entity Name: EKO CLUB FLORIDA, INC.

FILED Jul 29, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P O BOX 246176

PEMBROKE PINE, FL 33024

Current Mailing Address: New Mailing Address:

P O BOX 246176

PEMBROKE PINE, FL 33024

FEI Number: 65-1083715 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: Name and Address of New Registered Agent:

ABINA, ADEBAYO

1281 N W 202 ST

MIAMI, FL 33169 US

ABINA, ADEBAYO

16546 SW 39 STREET

MIRAMAR, FL 33027 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: ADEBAYO ABINA 07/29/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 ABINA, ADEBAYO
 Name:
 ABINA, ADEBAYO

 Address:
 1281 N W 2002 ST
 Address:
 16546 SW 39 STREET

 City-St-Zip:
 MIAMI, FL 33169
 City-St-Zip:
 MIRAMAR, FL 33027

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 AROMIRE, BASHEER
 Name:

 Address:
 5467 SW 11TH STREET
 Address:

 City-St-Zip:
 MARGATE, FL 33068
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 OLARINDE, OLATUNJI
 Name:

 Address:
 7434 SW 14TH CRT
 Address:

 City-St-Zip:
 NORTH LAUDERDALE, FL 33068
 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: ADEBAYO ABINA PD 07/29/2006