

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 27, 2004  
Secretary of State**

DOCUMENT# N01000001993

Entity Name: MIAMI-DADE COUNTY AQUATIC CLUB, INC.

**Current Principal Place of Business:**

10015 SW 2 TERRACE  
MIAMI, FL 33174

**New Principal Place of Business:**

**Current Mailing Address:**

10015 SW 2 TERRACE  
MIAMI, FL 33174

**New Mailing Address:**

FEI Number: 65-1085958      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DEL CERRO, MARGARITA  
10015 SW 2 TERRACE  
MIAMI, FL 33174      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: PDS      ( ) Delete  
Name: DEL CERRO, MARGARITA  
Address: 10015 SW 2 TERRACE  
City-St-Zip: MIAMI, FL 33174

Title: VD      ( ) Delete  
Name: RODRIGUEZ, RICARDO  
Address: 10015 SW 2 TERRACE  
City-St-Zip: MIAMI, FL 33174

Title: TD      ( ) Delete  
Name: RODRIGUEZ, DAVID  
Address: 10015 SW 2 TERRACE  
City-St-Zip: MIAMI, FL 33174

Title: SD      ( ) Delete  
Name: DEL CERRO, MARGARITA  
Address: 10015 SW 2 TERRACE  
City-St-Zip: MIAMI, FL 33174

**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: MARGARITA DELCERRO

O/D

04/27/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date