2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000005656

City-St-Zip:

Entity Name: MIA SHARKS ATHLETIC & SOCIAL ASSOCIATION, INC.

FILED May 27, 2002 8:00 AM Secretary of State

New Principal Place of Business: Current Principal Place of Business: 707 MAPLE DRIVE MARGATE, FL 33063 **Current Mailing Address: New Mailing Address:** 707 MAPLE DRIVE MARGATE, FL 33063 FEI Number: 65-0787801 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A 1840 SOUTHWEST 22ND STREET 4TH FLOOR MIAMI, FL 33145 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete VELEZ, JACQUELINE VELEZ, CARLOS Name: Name: 707 MAPLE DRIVE Address: 707 MAPLE DRIVE Address: City-St-Zip: MARGATE, FL 33063 City-St-Zip: MARGATE, FL 33063 Title: SVD () Delete Title: VD (X) Change () Addition Name: VELEZ, CARLOS Name: DELGADO, GREGORY Address: 707 MAPLE DRIVE Address: 707 MAPLE DRIVE City-St-Zip: MARGATE, FL 33063 City-St-Zip: MARGATE, FL 33063 Title: () Delete Title: () Change () Addition DE HART, STANLEY Name: Name: 707 MAPLE DRIVE Address: Address: City-St-Zip: MARGATE, FL 33063 City-St-Zip: Title: () Delete Title: SD () Change (X) Addition Name: Name: VELEZ, JACQUELINE 707 MAPLE DRIVE Address: Address:

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.

City-St-Zip:

MARGATE, FL 33063

SIGNATURE: STANLEY B DEHART TD 05/27/2002