

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002210

FILED
Mar 26, 2009
Secretary of State

Entity Name: HURRICANE BOXING GYM INC.

Current Principal Place of Business:

3715 E 7TH AVE
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7126
TAMPA, FL 33673

New Mailing Address:

FEI Number: 02-0588528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELEZ, WILBERTO
106 WEST GENESSE
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

VELEZ, WILBERTO
3715 E. 7TH AVE.
TAMPA, FL 33605 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: WILBERTO VELEZ

03/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VELEZ, WILBERTO
Address: 106 WEST GENESSE ST.
City-St-Zip: TAMPA, FL 33603

Title: CEO () Delete
Name: VELEZ, WILBERTO
Address: 106 WEST GENESSE ST.
City-St-Zip: TAMPA, FL 33603

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VELEZ, WILBERTO
Address: 3715 E. 7TH AVE.
City-St-Zip: TAMPA, FL 33605

Title: CEO (X) Change () Addition
Name: VELEZ, WILBERTO
Address: 3715 E. 7TH AVE.
City-St-Zip: TAMPA, FL 33605

I hereby certify that the information supplied with this filing does not qualify 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: WILBERTO VELEZ

PD

03/26/2009

Electronic Signature of Signing Officer or Director

Date