

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002530

FILED
Mar 21, 2005
Secretary of State

Entity Name: SOUTH FLORIDA SPORTS LEAGUE, INC.

Current Principal Place of Business:

2520 CORAL WAY
STE 2309
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

2520 CORAL WAY
STE 2309
MIAMI, FL 33145

New Mailing Address:

FEI Number: 75-3050477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHACON, GUILLERMO M
2456 SW 31ST AVE.
MIAMI, FL 33145 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: D () Delete
Name: CHACON, GUILLERMO M
Address: 2456 SW 31ST AVE.
City-St-Zip: MIAMI, FL 33145

Title: D () Delete
Name: CHACON, GUSTAVO
Address: 1025 NW 21ST CT.
City-St-Zip: MIAMI, FL 33125

Title: D () Delete
Name: PARENTE, JUAN
Address: 13114 SW 205TH LANE
City-St-Zip: MIAMI, FL 33177

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: CHACON, GUILLERMO M
Address: 2456 SW 31ST AVE.
City-St-Zip: MIAMI, FL 33145

Title: BD (X) Change () Addition
Name: FLORES, JUAN C
Address: 1420 BRICKELL BAY DR. #404
City-St-Zip: MIAMI, FL 33131

Title: BD (X) Change () Addition
Name: PARENTE, JUAN
Address: 13114 SW 205TH LANE
City-St-Zip: MIAMI, FL 33177

Title: BD () Change (X) Addition
Name: SALUM, IRENE
Address: 7700 N. KENDALL DRIVE
City-St-Zip: MIAMI, FL 33156

Title: BD () Change (X) Addition
Name: RUBIO, MARCO
Address: 6427 SW 8 STREET
City-St-Zip: MIAMI, FL 33144

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: GUILLERMO M. CHACON

ED

03/21/2005

Electronic Signature of Signing Officer or Director

Date