2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008733

Entity Name: CUDA KEYS BOOSTER CLUB, INC.

FILED Apr 29, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

9972 SW 154 COURT 9721 SW 121 STREET MIAMI, FL 33196 9721 SW 121 STREET MIAMI, FL 33176

Current Mailing Address: New Mailing Address:

9972 SW 154 COURT 9721 SW 121 STREET MIAMI, FL 33196 MIAMI, FL 33176

FEI Number: 36-4512568 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:

LAURENCEAU, FRITZ
9972 SW 154 COURT
MIAMI, FL 33196 US

ILIC, SUZANNE
9721 SW 121 STREET
MIAMI, FL 33176 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: SUZANNE ILIC 04/29/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P/D
 () Delete
 Title:
 P/D
 (X) Change () Addition

 Name:
 LAURENCEAU, FRITZ
 Name:
 ILIC, SUZANNE

 Address:
 9972 SW 154 COURT
 Address:
 9972 SW 154 COURT

 Address:
 9972 SW 154 COURT
 Address:
 9972 SW 154 COURT

 City-St-Zip:
 MIAMI, FL 33196
 City-St-Zip:
 MIAMI, FL 33196

Title: VP/D () Delete Title: () Change () Addition

 Name:
 ANGULO, MARIA
 Name:

 Address:
 12045 SW 116 TERRACE
 Address:

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:

Title: S/D () Delete Title: () Change () Addition

 Name:
 FLINK, LIL
 Name:

 Address:
 16710 SW 82 COURT
 Address:

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:

Title: T/D () Delete Title: () Change () Addition

 Name:
 WILLIAMS, AUBREY
 Name:

 Address:
 10421 SW 136 STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:

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: AUBREY WILLIAMS T/D 04/29/2007