

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

DOCUMENT# N02000009173

**FILED**  
**Jul 04, 2004**  
**Secretary of State****Entity Name:** STUDENT POWER UP, INC.**Current Principal Place of Business:**12501 SW 62 AVE  
CORAL GABLES, FL 33156**New Principal Place of Business:****Current Mailing Address:**12501 SW 62 AVE  
CORAL GABLES, FL 33156**New Mailing Address:****FEI Number:** 43-2000249**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**TABAS, JOEL  
25 SE 2 AVE STE 919  
MIAMI, FL 33131 US**Name and Address of New Registered Agent:**TABAS, JOEL  
25 SE 2 AVE STE 919  
MIAMI, FL 33131 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:** JOEL TABAS

07/04/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** D ( ) Delete  
**Name:** BRICKER, TEDDY  
**Address:** 12501 SW 62 AVE  
**City-St-Zip:** CORAL GABLES, FL 33156**Title:** D ( ) Delete  
**Name:** DAVID, GUY  
**Address:** 7185 SW 101 ST  
**City-St-Zip:** MIAMI, FL 33156**Title:** D ( ) Delete  
**Name:** TABAS, SUSAN  
**Address:** 12501 SW 62 AVE  
**City-St-Zip:** CORAL GABLES, FL 33156**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:**

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:** SUSAN BRICKER TABAS

SECY

07/04/2004

Electronic Signature of Signing Officer or Director

Date