


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 17, 2005 8:00 am
Secretary of State


07-21-2005 90032 007 ****70.00

DOCUMENT # N03000003040	
1. Entity Name TAMIA MI YOUTH BASKETBALL ASSOCIATION, INC.	

Principal Place of Business 10541 SW 120TH AVE MIAMI, FL 33186	Mailing Address 10541 SW 120TH AVE MIAMI, FL 33186
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DO NOT WRITE IN THIS SPACE

66043000



07112005 No Chg-NP CR2E037 (10/03)

4. FEI Number 27-0052991	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**ETCHEVERRY KOURI & HARRISON, LLP
2500 WESTON RD, STE 400
WESTON, FL 33331**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **OSCAR L. FARINAS** **7/11/05**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agents signature required when renewing) DATE


Filing Fee is \$61.25 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE DP	NAME PEREZ, DANIEL J
STREET ADDRESS 3510 SW 117TH CT	CITY-ST-ZIP MIAMI, FL 33175
TITLE DV	NAME SARRADET, GEORGE
STREET ADDRESS 7224 SW 13SND COURT	CITY-ST-ZIP MIAMI, FL 33183
TITLE DS	NAME FARINAS, OSCAR L
STREET ADDRESS 10541 SW 120TH AVE	CITY-ST-ZIP MIAMI, FL 33186
TITLE DT	NAME SARRADET, CARLOS A
STREET ADDRESS 8545 SW 81ST TERRACE	CITY-ST-ZIP MIAMI, FL 33143
TITLE 	NAME
STREET ADDRESS 	CITY-ST-ZIP
TITLE 	NAME
STREET ADDRESS 	CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **OSCAR FARINAS** **8/13/05** **(305)439-9549**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #