

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

DOCUMENT# N03000004252

**FILED**  
**Sep 29, 2004**  
**Secretary of State****Entity Name:** PREMIER BASKETBALL ASSOCIATION, INC.**Current Principal Place of Business:**7770 NW 160 TERRACE  
MIAMI LAKES, FL 33016**New Principal Place of Business:**7770 NW 160 TERRACE  
MIAMI LAKES, FL 33016 US**Current Mailing Address:**7770 NW 160 TERRACE  
MIAMI LAKES, FL 33016**New Mailing Address:**7770 NW 160 TERRACE  
MIAMI LAKES, FL 33016 US**FEI Number:** 56-2379339**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**PEREZ, JOEL  
7770 NW 160 TERRACE  
MIAMI LAKES, FL 33016**Name and Address of New Registered Agent:**PEREZ, JOEL  
7770 NW 160 TERRACE  
MIAMI LAKES, FL 33016 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: \_\_\_\_\_

09/29/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PEREZ, JOEL  
Address: 7770 NW 160 TERRACE  
City-St-Zip: MIAMI LAKES, FL 33016

Title: SD ( ) Delete  
Name: PEREZ, MELISSA  
Address: 7770 NW 160 TERRACE  
City-St-Zip: MIAMI LAKES, FL 33016

Title: TD ( ) Delete  
Name: PEREZ, PRISCILLA  
Address: 7770 NW 160 TERRACE  
City-St-Zip: MIAMI LAKES, FL 33016

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: PEREZ, JOEL  
Address: 7770 NW 160 TERRACE  
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: SD (X) Change ( ) Addition  
Name: PEREZ, MELISSA  
Address: 7770 NW 160 TERRACE  
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: TD (X) Change ( ) Addition  
Name: PEREZ, PRISCILLA  
Address: 7770 NW 160 TERRACE  
City-St-Zip: MIAMI LAKES, FL 33016 US

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: JOEL PEREZ

PD

09/29/2004

Electronic Signature of Signing Officer or Director

Date