

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008875

FILED  
Jun 30, 2005  
Secretary of State

Entity Name: S.C.H.E. RACING PIGEON CLUB, INC.

**Current Principal Place of Business:**

4493 S.W. 75TH AVENUE  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

2650 SW 69 AVENUE  
MIAMI, FL 33155

**New Mailing Address:**

FEI Number: 20-1444266      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

SIMON, ENRIQUE A  
2650 S.W. 69 AVENUE  
MIAMI, FL 33155      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: SD      ( ) Delete  
Name: SIMON, ENRIQUE A  
Address: 2650 S.W. 69 AVENUE  
City-St-Zip: MIAMI, FL 33155

Title: TD      ( ) Delete  
Name: MULLER, PETER C  
Address: 1645 S.W. 67TH COURT  
City-St-Zip: MIAMI, FL 33155

Title: PD      ( ) Delete  
Name: CALDERON, GERMAN  
Address: 2920 SW 118 AVE  
City-St-Zip: MIAMI, FL 33175

**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: ENRIQUE SIMON

SD

06/30/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date