

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Sep 13, 2004
Secretary of State**

DOCUMENT# N03000010510

Entity Name: BROWARD BASKETBALL CLUB, INC.

Current Principal Place of Business:

1806 NW 78TH WAY
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

1806 NW 78TH WAY
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 61-1461918 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PASCUCCI, NICHOLAS J
1806 NW 78TH WAY
PEMBROKE PINES, FL 33024 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: P () Delete
Name: PASCUCCI, NICHOLAS J
Address: 1806 NW 78TH WAY
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VP () Delete
Name: LARGACH, XAVIER
Address: 1825 SW 177TH TERRACE
City-St-Zip: MIRAMAR, FL 33029

Title: T () Delete
Name: PENNY, JOVANKA
Address: 1522 NW 178TH WAY
City-St-Zip: PEMBROKE PINES,, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: PASCUCCI, BRIGETTE I
Address: 1806 NW 78TH WAY
City-St-Zip: PEMBROKE PINES,, FL 33024

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: NICHOLAS PASCUCCI

P

09/13/2004

Electronic Signature of Signing Officer or Director

_____ Date