

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000075

FILED
May 09, 2005
Secretary of State

Entity Name: TEAM USA MIAMI BASEBALL ,INC.

Current Principal Place of Business:

8140 NW 74TH AVENUE
4
MEDLEY, FL 33166

New Principal Place of Business:

8140 NW 74TH AVENUE
3
MEDLEY, FL 33166

Current Mailing Address:

8140 NW 74TH AVENUE
3
MEDLEY, FL 33166

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

Name and Address of New Registered Agent:

NICOLAS, RAFAEL R SR
8140 NW 74TH AVENUE
3
MEDLEY, FL 33166 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: GM () Delete
Name: NICOLAS, RAFAEL R SR
Address: 8125 NW 74TH AVENUE
City-St-Zip: MEDLEY, FL 33166 US

Title: VP () Delete
Name: NICOLAS, MARIA
Address: 8125 NW 74TH AVENUE
City-St-Zip: MEDLEY, FL 33166 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RAFAEL NICOLAS

GM

05/09/2005

Electronic Signature of Signing Officer or Director

Date