## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000011028

Entity Name: OPA LOCKA BOXING CLUB INC

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17711 NW 11TH AVENUE MIAMI GARDENS, FL 33169

Current Mailing Address: New Mailing Address:

17711 NW 11TH AVENUE MIAMI GARDENS, FL 33169

FEI Number: 13-4359238 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PINEAR, DARLY PINEAR, DARLY D
3231 N.W. 171 STREET
MIAMI GARDENS, FL 33056 US MIAMI GARDENS, FL 33056 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: DARLY D. PINEAR 04/25/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VP ( ) Delete
 Title:
 P (X) Change ( ) Addition

 Name:
 ROBINSON, ASHANTI
 Name:
 ROBINSON, HOWARD

 Address:
 17711 NW 11TH AVENUE
 Address:
 17711 NW 11TH AVENUE

 City-St-Zip:
 MIAMI GARDENS, FL 33169
 City-St-Zip:
 MIAMI GARDENS, FL 33169

Title: T ( ) Delete Title: VP (X) Change ( ) Addition Name: ROBINSON, EVERARD Name: ROBINSON, ASHANTI

Address: 17711 NW 11TH AVENUE Address: 17711 NW 11TH AVENUE City-St-Zip: MIAMI GARDENS, FL 33169 City-St-Zip: MIAMI GARDENS, FL 33169

Title: RA ( ) Delete Title: T (X) Change ( ) Addition Name: PINEAR, DARLY Name: ROBINSON, EVERARD

Address: 3231 N.W. 171 STREET Address: 17711 NW 11 AVE

City-St-Zip: MIAMI, FL 33056 City-St-Zip: MIAMI GARDENS, FL 33169

Title: P (X) Delete Title: ( ) Change ( ) Addition

 Name:
 ROBINSON, HOWARD
 Name:

 Address:
 17711 NW 11TH AVENUE
 Address:

 City-St-Zip:
 MIAMI GARDENS, FL 33169
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: EVERARD ROBINSON T 04/25/2008