

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 12, 2009
Secretary of State

DOCUMENT# N05000001289

Entity Name: THE BROWARD SCORPIONS, INC.**Current Principal Place of Business:**20890 NW 18TH ST
PEMBROKE PINES, FL 33029**New Principal Place of Business:****Current Mailing Address:**20890 NW 18TH ST
PEMBROKE PINES, FL 33029**New Mailing Address:****FEI Number:** 83-0418154**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PELLON, ALEJANDRO
20890 NW 18TH ST.
PEMBROKE PINES, FL 33029 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:** MR. () Delete
Name: PELLON, ALEJANDRO
Address: 20890 NW 18TH ST.
City-St-Zip: PEMBROKE PINES, FL 33029**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MR. () Change (X) Addition
Name: PRZESTRZELSKI, FRANK
Address: 725 NW 156TH AVE.
City-St-Zip: PEMBROKE PINES, FL 33028

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: FRANK PRZESTRZELSKI

MR

06/12/2009

Electronic Signature of Signing Officer or Director

Date