2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

FILED Mar 07, 2006 8:00 am Secretary of State DOCUMENT # N05000004934 03-07-2006 90193 001 *****8.75 MIAMI BOYS BASEBALL ACADEMY: CORP. 03-07-2006 90193 002 ****61.25 03-07-2006 90193 003 *****5.00 Principal Place of Business Mailing Address 101 SW 24TH AVE 101 SW 24TH AVE -MIAMI FL 33135 MIAMI FL 33135 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent - \ REYES, MISAEL Street Address (P.O. Box Number is Not Acceptable) 7960 SW 18TH TERR **MIAMI FL 33155** City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete THE ■ Addition REYES, REMBERTO NAME NAMI 101 SW 24TH AVE STREET ADDRESS STREET ADDRESS **MIAMI FL 33135** CITY-ST-ZIP CITY - S1 - ZIP ☐ Delete TITLE TITLE Change ■ Addition REYES, MISAEL 7960 SW 18TH TERR STREET ADDRESS STREET ADDRESS MIAMI FL 33155 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TETLE NAME CARBONELL, MARCIAL NAME STREET ADDRESS **1795 SW 18TH STREET** STREET ADDRESS MIAMI FL 33145 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAVARRETE, RAFAEL STREET ADDRESS 7340 NW 41ST ST STREET ADDRESS CITY-ST-7IP **MIAMI FL 33126** CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

-**3**-06 (305)643-6439