

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000000419

**FILED**  
**Oct 11, 2007**  
**Secretary of State**

**Entity Name:** SOCCER FOR ALL, INC.

**Current Principal Place of Business:**

2525 PONCE DE LEON BLVD., STE. 400  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2525 PONCE DE LEON BLVD., STE. 400  
CORAL GABLES, FL 33134

**New Mailing Address:**

C/O ALFREDO L. GONZALEZ  
2525 PONCE DE LEON BLVD., STE. 400  
CORAL GABLES, FL 33134

**FEI Number:** 20-4119743      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **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:**

GONZALEZ, ALFREDO L. ESQ.  
2525 PONCE DE LEON BLVD., STE. 400  
ADORNO & YOSS LLP  
CORAL GABLES, FL 33134 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:** ALFREDO L. GONZALEZ

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D      ( ) Delete  
**Name:** GONCALVES, JOSE T.  
**Address:** 9440 BOCA CIRCLE DR.  
**City-St-Zip:** BOCA RATON, FL 33434

**Title:** D      ( ) Delete  
**Name:** TORDIN, FABIO  
**Address:** 6346 NW 113 CT.  
**City-St-Zip:** DORAL, FL 33178

**Title:** D      ( ) Delete  
**Name:** PINTO, JULIO C.  
**Address:** 251 CRANDON BLVD., STE. 833  
**City-St-Zip:** KEY BISCAYNE, FL 33149

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

**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 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:** JOSE T. GONCALVES

D

10/11/2007

Electronic Signature of Signing Officer or Director

Date