

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000334

FILED
Mar 20, 2009
Secretary of State

Entity Name: SUPREME COURT BASKETBALL CLUB, INC.

Current Principal Place of Business:

18220 NW 86TH AVE.
MIAMI, FL 33015

New Principal Place of Business:

Current Mailing Address:

18220 NW 86TH AVE.
MIAMI, FL 33015

New Mailing Address:

FEI Number: 26-2090256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, RONNIE D
14695 SW 33RD COURT
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

SMITH, RONNIE D
3102 SW 139TH STREET
MIRAMAR, FL 33027 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: _____

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, RONNIE D
Address: 14695 SW 33RD COURT
City-St-Zip: MIRAMAR, FL 33027

Title: VP () Delete
Name: CORRAL, JESUS
Address: 18220 NW 86TH AVE
City-St-Zip: MIAMI, FL 33015

Title: VP F () Delete
Name: CORRAL, LOURDES
Address: 18220 NW 86TH AVE
City-St-Zip: MIAMI, FL 33015

Title: VP O () Delete
Name: CORRAL, ANTHONY
Address: 18220 NW 86TH AVE
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, RONNIE D
Address: 3102 SW 139TH STREET
City-St-Zip: MIRAMAR, FL 33027

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: RONNIE D. SMITH

PRES

03/20/2009

Electronic Signature of Signing Officer or Director

Date