

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 18, 2008  
Secretary of State**

DOCUMENT# N07000001281

Entity Name: FLORIDA DESI BASKETBALL LEAGUE, INC.

**Current Principal Place of Business:**

30613 LATOURETTE DR  
WESLEY CHAPEL, FL 33544

**New Principal Place of Business:**

**Current Mailing Address:**

30613 LATOURETTE DR  
WESLEY CHAPEL, FL 33544

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired (X)

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

PATEL, AMAN  
30613 LATOURETTE DR  
WESLEY CHAPEL, FL 33544      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:                      P                      ( ) Delete  
Name:                      PATEL, AMAN  
Address:                      30613 LATOURETTE DR  
City-St-Zip:                      WESLEY CHAPEL, FL 33544

Title:                      VP                      ( ) Delete  
Name:                      KOSHEY, JASON  
Address:                      30613 LATOURETTE DR  
City-St-Zip:                      WESLEY CHAPEL, FL 33544

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

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: AMAN PATEL

P

02/18/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date