2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Feb 25, 2009 DOCUMENT# N07420 Secretary of State

Entity Name: TAMIAMI YOUTH BASEBALL ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2400 SW 112 AVENUE 11201 SW 24 STREET MIAMI, FL 33165 US MIAMI, FL 33165

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 65-1751 MIAMI, FL 33165

FEI Number: 59-2500682 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ESTRADA, RAUL 11525 SW 33 TERRACE MIAMI, FL 33165

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

ESTRADA, RAUL Name: Name: 11525 SW 33 TERRACE Address: Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip:

Title: () Delete Title: (X) Change () Addition MERCEDES, CASALS Name: Name: CASALS, MERCEDES

Address: 948 NW 128 PL Address: 9310 SW 48 STREET City-St-Zip: MIAMI, FL 33182 City-St-Zip: MIAMI, FL 33165

Title: () Delete Title: (X) Change () Addition CASALS, ALEJANDRO CASALS, ALEJANDRO Name: Name:

948 NW 128 PLACE 9310 SW 48 STREET Address: Address: City-St-Zip: MIAMI, FL 33182 City-St-Zip: MIAMI, FL 33165

Title: CD () Delete Title: (X) Change () Addition

Name: ALFREDO, LLAGUNO Name: CALAS, PERLA 10800 S.W. 32 STREET Address: Address: 13214 SW 9 TERRACE MIAMI, FL 33165

City-St-Zip: City-St-Zip: MIAMI, FL 33184

Title: (X) Delete Title: () Change () Addition QUINTERO, LUIS Name: Name: 13415 SW 28 STREET Address: Address: City-St-Zip: MIAMI, FL 33175 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: RAUL ESTRADA PD 02/25/2009