## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000003636

Address:

City-St-Zip:

MIAMI, FL 33186 US

Entity Name: E & H BOOSTER CLUB, INC.

Apr 01, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 14629 SW 104 STREET SUITE 514 MIAMI, FL 33186 **New Mailing Address: Current Mailing Address:** 14629 SW 104 STREET SUITE 514 MIAMI, FL 33186 US FEI Number: 26-2400975 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: KEARNS, DONALD P JR 10245 SW 154 PLACE SUITE 102 MIAMI, FL 33196 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FERNANDEZ, JANINE Name: Name: 14629 SW 104 STREET, SUITE 514 Address: Address: City-St-Zip: MIAMI, FL 33196 US City-St-Zip: Title: Title: ( ) Delete () Change () Addition KEARNS, DONALD P JR Name: Name: Address: 10245 SW 154 PLACE SUITE 102 Address: City-St-Zip: MIAMI, FL 33196 US City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition ARAUZ, IRIS Name: BLUMENGOLD, MYRON Name: 14629 SW 104 STREET, SUITE 514 14629 SW 104 STREET, SUITE 514 Address: Address: City-St-Zip: MIAMI, FL 33186 US City-St-Zip: MIAMI, FL 33186 US Title: ( ) Delete Title: () Change () Addition Name: BLUMENGOLD, NELLA Name: 14629 SW 104 STREET, SUITE 514 Address: Address: City-St-Zip: MIAMI, FL 33186 US City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition GREEN, TERRI SANCHEZ, KRIS Name: Name: 14629 SW 104 STREET, SUITE 514 14629 SW 104 STREET, SUITE 514

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.

Address:

City-St-Zip:

MIAMI, FL 33186 US

SIGNATURE: DONALD P. KEARNS, JR VP 04/01/2009