2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 11, 2009
Secretary of State

DOCUMENT# N08000005923

Entity Name: MIRAMAR STRIKERS UNITED INC.

Current Principal Place of Business:

2366 SW 162ND TERRACE
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

2366 SW 162ND TERRACE
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 26-2848165 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CULLEN, JOHN T
12401 ORANGE DR
127
DAVIE, FL 33330 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:	PT	( ) Delete
Name:	CHRISTIAN LEMMERS, LISA-GAY	
Address:	2366 SW 162ND TERRACE	
City-St-Zip:	MIRAMAR, FL 33027	
Title:	S	(X) Delete
Name:	FRECHETTE, TINA	
Address:	1922 NW 184 WAY	
City-St-Zip:	PEMBROKE PINES, FL 33029	
Title:	D	( ) Delete
Name:	GIULIANI, DEBRA	
Address:	17756 SW 27 COURT	
City-St-Zip:	MIRAMAR, FL 33029	
Title:	D	( ) Delete
Name:	DOBLES, TANYA	
Address:	17922 SW 5 STREET	
City-St-Zip:	PEMBROKE PINES, FL 33029	

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:	
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: LISA-GAY CHRISTIAN-LEMMERS PT 12/11/2009

Electronic Signature of Signing Officer or Director — Date