2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# N30227

Entity Name: SPORTSMEN FOR BETTER HEALTH, INC.

Current Principal Place of Business:

724 S FLAGLER
HOMESTEAD, FL 33030 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 310
HOMESTEAD, FL 330900310 US

New Mailing Address:

FEI Number: 65-0124705 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARCUS, MICHAEL J.
317 NORTH KROME AVENUE
HOMESTEAD, FL 33030 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: D ( ) Delete
Name: SANCHEZ, JUAN M
Address: 1420 FLAMINGO CT
City-St-Zip: HOMESTEAD, FL 33035

Title: D ( ) Delete
Name: BLAYLOCK,LAWRENCE HAYDEN
Address: 14995 SW 264TH STREET
City-St-Zip: NARANJA, FL

Title: D ( ) Delete
Name: HOHN, WILLIAM E.
Address: 16931 SW 302 TERRACE
City-St-Zip: HOMESTEAD, FL

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:

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: JUAN M SANCHEZ D 04/17/2009

Electronic Signature of Signing Officer or Director — Date