

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003723

FILED  
May 15, 2008  
Secretary of State

Entity Name: SEAHORSE WRESTLING CLUB, INC.

**Current Principal Place of Business:**

1800 N 27 AVE  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4527  
HOLLYWOOD, FL 33083

**New Mailing Address:**

FEI Number: 65-0571869      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BROWN, D C  
1215 SE 2ND AVE  
STE 102  
FT LAUD, FL 33316 US

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

HELD, ALLEN  
4225 WASHINGTON ST  
HOLLYWOOD, FL 33021 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: ALLEN HELD

05/15/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SCHULZ, RON  
Address: 1800 N. 27 AVE  
City-St-Zip: HOLLYWOOD, FL 33020

Title: D ( ) Delete  
Name: WILLIAMS, STEVE  
Address: 7435 NW 44 ST., #1202  
City-St-Zip: LAUDERHILL, FL 33319

Title: D ( ) Delete  
Name: TORRES, JOSEPH  
Address: 40001 NW 61ST WAY  
City-St-Zip: CORAL WAY, FL 33067

Title: D ( ) Delete  
Name: HELD, ALLEN  
Address: 4225 WASHINGTON ST  
City-St-Zip: HOLLYWOOD, FL 33021

**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: RON SCHULZ

DIR

05/15/2008

Electronic Signature of Signing Officer or Director

Date