

DOCUMENT # N95000002727

1. Entity Name

MIAMI ISLANDERS SPORTS & CULTURAL CLUB, INC.

**FILED**  
**May 09, 2000 8:00 am**  
**Secretary of State**

05-09-2000 90031 009 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

1301 N.W. 133RD STREET  
MIAMI FL 33167  
US

1301 N.W. 133RD STREET  
MIAMI FL 33167-1722  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0588960

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CAMPBELL, PATRICK R  
1301 N.W. 133RD ST.  
MIAMI FL 33167

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P  
NAME CAMPBELL, PATRICK  
STREET ADDRESS 1301 N.W. 133RD STREET  
CITY-ST-ZIP MIAMI FL 33167 ☒ Delete

TITLE VPD  
NAME ROSTON, AUDIN  
STREET ADDRESS 151 N.E. 10TH AVE.  
CITY-ST-ZIP MIAMI FL 33162 ☒ Delete

TITLE TD  
NAME HENRY, RICHARD  
STREET ADDRESS 16823 N.W. 53RD AVE.  
CITY-ST-ZIP MIAMI FL 33055 ☐ Delete

TITLE SD  
NAME MAXWELL, DIONE  
STREET ADDRESS 13101 N.E. 6TH AVE., #210  
CITY-ST-ZIP N. MIAMI FL 33162 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE P  
NAME DAVY GORGE  
STREET ADDRESS 3415 NW 204TH TERR  
CITY-ST-ZIP M.I.A. FL 33056 ☒ Change ☒ Addition

TITLE VPD  
NAME MAXWELL, TREVOR  
STREET ADDRESS 13101 NE 6TH AVE. #210  
CITY-ST-ZIP N. MIAMI FL 33162 ☒ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)