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Mar 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000005112 (6)

1. Corporation Name
FUTURE CHAMPS, INC.



Principal Place of Business Mailing Address
4054 WEST 12TH AVE. 4054 WEST 12TH AVE.
HIALEAH FL 33012 HIALEAH FL 33012-4106

3. Date Incorporated or Qualified 10/30/1995 3a. Date of Last Report 05/01/1996
4. FEI Number 65-0635444 Applied For
D L N # 170432710 44206
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
CERVANTES, NILDA
10090 NW 80 CT., #1161
HIALEAH GARDENS FL 33016

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS
TITLE P/D DELETE
NAME CERVANTES, NILDA
STREET ADDRESS 10090 NW 80 CT., #1161
CITY-ST-ZIP HIALEAH GARDENS FL 33016
TITLE S/T DELETE
NAME CARIDAD, BRITO
STREET ADDRESS 7316 W. 30 AVE.
CITY-ST-ZIP HIALEAH FL 33016
TITLE D DELETE
NAME CERVANTES, JORGE
STREET ADDRESS 10090 NW 80 CT., #1161
CITY-ST-ZIP HIALEAH GARDENS FL 33016
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME P/D Nilda STERRITT
1.3 STREET ADDRESS 1799 NW 162 Ave
1.4 CITY-ST-ZIP Pembroke Pines 33028
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Nilda Sterritt 3/18/97 305-556-9526
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0022936

CR2E037 (9/96)