


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 25, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N96000003317</b> 1. Entity Name <b>PINE BAY WRESTLING CLUB INC.</b>	
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Principal Place of Business <b>C/O THOMAS E. KRAUSE ATTORNEY 9700 S DIXIE HWY SUITE 550 MIAMI FL 33156</b>	Mailing Address <b>C/O THOMAS E. KRAUSE ATTORNEY 9700 S DIXIE HWY SUITE 550 MIAMI FL 33156</b>
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number <b>65-0684278</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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<b>6. Name and Address of Current Registered Agent</b>  <b>KRAUSE, THOMAS E. 9700 S DIXIE HWY #550 MIAMI FL 33156</b>	<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b> Zip Code</span>
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>
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<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete MCLUSKEY, JON W TWO DATRAN CTR #1901, 9130 S DADELAND BLVD MIAMI FL 33156
TITLE	PD <input type="checkbox"/> Delete SHAPRIO, DANIEL 15351 SW 87TH CT MIAMI FL 33157
TITLE	DT <input type="checkbox"/> Delete FISHER, MILTON 7520 SW 57 AVE. STE. A MIAMI FL 33143
TITLE	D <input type="checkbox"/> Delete THAYER, ALAN 10382 SW 144TH ST MIAMI FL 33176
TITLE	<input type="checkbox"/> Delete
TITLE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: 	AS TREASURER <b>MILTON FISHER</b>
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04-20-06 305-662-2413