

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000006512

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: SOUTH FLORIDA INNER CITY GAMES FOUNDATION, INC.

Current Principal Place of Business:

3010 NW 17TH AVE
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

3010 NW 17TH AVE
MIAMI, FL 33142

New Mailing Address:

FEI Number: 65-0715767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNOFSKY, JODIE
3010 NW 17TH AVENUE
MIAMI, FL 33142

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: CD () Delete
Name: DIAZ, RAUL
Address: C/O 3010 NW 17TH AVE
City-St-Zip: MIAMI, FL 33142

Title: VCD () Delete
Name: DUBOSE, SHERWOOD
Address: C/O MAPP 19 W FLAGLER ST
City-St-Zip: MIAMI, FL 33128

Title: PD () Delete
Name: ADORNO, HENRY N
Address: 2601 S BAYSHORE DR, STE. 1600
City-St-Zip: MIAMI, FL

Title: S () Delete
Name: BELL, RON
Address: 275 NW 2ND ST.
City-St-Zip: MIAMI, FL 33128

Title: T () Delete
Name: BROMIR, ALEX
Address: 1450 NE 2ND AVE/
City-St-Zip: MIAMI, FL 33132

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: DIAZ, RAUL
Address: C/O 3010 NW 17TH AVE
City-St-Zip: MIAMI, FL 33142

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: IRVINE, WILLIAM
Address: 275 NW 2ND ST.
City-St-Zip: MIAMI, FL 33128

Title: TD (X) Change () Addition
Name: BROMIR, ALEX
Address: 1450 NE 2ND AVE
City-St-Zip: MIAMI, FL 33132

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RAUL DIAZ

CD

05/01/2002

Electronic Signature of Signing Officer or Director

_____ Date