2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9800000451 Sep 13, 2000 8:00 am Secretary of State BASEBALL MUSEUM-HIALEAH, INC. 09-13-2000 90054 039 ****61.25 Principal Place of Business Mailing Address 9555 NORTH KENDALL DRIVE 9555 NORTH KENDALL DRIVE , A STE. 200 MIAM! FL 33176 MIAMI FL 33176 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE PO Box City & State City & State 4. FEI Number Applied For 65-0878645 MAC Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DHN VENABLES Street Address (P.O. Box Number is Not Acceptable) 5040 N.W. 7 Street #430 JOYCE, RICHARD F III 9555 N KENDALL DRIVE Miami, Florida 33126 SUITE 200 Zip Code **MIAMI FL 33176** 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 nted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State After September 13, 2000 min. will be \$236.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. CD TITLE ☐ Addition ☐ Delete VENABLES, JOHN NAME NAME STREET ADDRESS 9555 N. KENDALL DRIVE #200 CR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33176** Change Addition TITLE TITLE Delete NAME WHITE, PAT NAME STREET ADDRESS 9555 N. KENDALL DRIVE #200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33176 VCD Addition TITLE □ Defete TITLE 📆 Change LOPEZ, VINCE NAME NAME STREET ADDRESS 9555 N. KENDALL DR. #200 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **MIAMI FL 33176** TD TITLE □ Delete TITLE Change Addition CHEETHAM, ROBERT NAME NAME STREET ADDRESS 2095 WEST 76 STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-Z\P HIALEAH FL 33016 Change 🛣 ☐ Delete TITLE Addition **BILLA SUSSO, ELOY** VILLASUSSO, ELOY NAME NAME STREET ADDRESS 9555 N. KENDALL DR. #200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33176** GCD TITLE Delete TITLE Change Addition JOYCE, RICHARD F III NAME NAME STREET ADDRESS 9555 N. KENDALL DR. #200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33176**

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 AND TYPED OR PRINTED NAME OF SIGNING OFF

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