# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000003811

Entity Name: MIAMI PREMIER SOCCER CLUB, INC.

FILED Jan 09, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

8501 SW 53 AVENUE 2451 SALZEDO STREET 605

MIAMI, FL 33143

CORAL GABLES, FL 33146

**Current Mailing Address: New Mailing Address:** 

8501 SW 53 AVENUE 2451 SALZEDO STREET MIAMI, FL 33143 605

CORAL GABLES, FL 33146

FEI Number: 65-0853961 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

#### Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ENGELKE, MICHAEL ENGELKE, MICHAEL 6829 VERÓNESE STREET 2665 SW 37 AVENUE CORAL GABLES, FL 33146 US 1405 MIAMI, FL 33133 US

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: 01/09/2008

Electronic Signature of Registered Agent Date

### **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition

CAVIGLIA, SILVIA Name: Name: Address: 2703 DAY AVENUE Address:

City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip:

Title: TDS () Delete Title: TDS (X) Change ( ) Addition

Name: ENGELKE, MICHAEL Name: ENGELKE, MICHAEL Address: 6829 VERONESE ST Address: 2665 SW 37 AVENUE City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: MIAMI, FL 33133

Title: SEC (X) Delete Title: () Change () Addition

REUSS, IRINA Name: Name: 8501 SW 53 AVENUE Address: Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MICHAEL ENGELKE TDS 01/09/2008