

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003811

FILED
Feb 05, 2009
Secretary of State

Entity Name: MIAMI PREMIER SOCCER CLUB, INC.

Current Principal Place of Business:

2451 SALZEDO STREET
605
CORAL GABLES, FL 33146

New Principal Place of Business:

7726 SW 54 AVENUE
MIAMI, FL 33143

Current Mailing Address:

2451 SALZEDO STREET
605
CORAL GABLES, FL 33146

New Mailing Address:

7726 SW 54 AVENUE
MIAMI, FL 33143

FEI Number: 65-0853961

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ENGELKE, MICHAEL
2665 SW 37 AVENUE
1405
MIAMI, FL 33133 US

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: PD () Delete
Name: CAVIGLIA, SILVIA
Address: 2703 DAY AVENUE
City-St-Zip: COCONUT GROVE, FL 33133

Title: TDS () Delete
Name: ENGELKE, MICHAEL
Address: 2665 SW 37 AVENUE
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAVIGLIA, SILVIA
Address: 3034 DAY AVENUE
City-St-Zip: COCONUT GROVE, FL 33133

Title: () Change () Addition
Name:
Address:
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

02/05/2009

Electronic Signature of Signing Officer or Director

_____ Date