

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90042 009 ****61.25

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01042006 Chg-NP CR2E037 (11/05)

DOCUMENT # N98000005394 1. Entity Name RAMS BASEBALL BOOSTER CLUB, INC.					
Principal Place of Business 6470 SW 157 PLACE MIAMI, FL 33193			Mailing Address 6470 SW 157 PLACE MIAMI, FL 33193		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0864489	
5. Certificate of Status Desired ☐				☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARBALLEIRA, HILDA 6470 SW 157 PLACE MIAMI, FL 33193			7. Name and Address of New Registered Agent Name Eddy Gomez Street Address (P.O. Box Number is Not Acceptable) 2025 SW 133 Court City Miami FL Zip Code 33175		
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 Signature, typed or printed name of registered agent and title if applicable		Eddy Gomez (NOTE: Registered Agent signature required when reinstating)		1/9/06 DATE	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD CARBALLEIRA, HILDA 6470 SW 157 PLACE MIAMI, FL 33193	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Eddy Gomez 2025 SW 133 Ct. Miami, FL 33175
				☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RAINELLI, LUCIO 9441 SW 21 STREET MIAMI, FL 33165	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Eduardo Encinosa 9021 SW 10 TER. Miami, FL 33174
				☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PEREZ, ADOLFO 2411 SW 83 AVENUE MIAMI, FL 33155	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)
				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GONZALEZ, EMMA 7840 SW 18 TERRACE MIAMI, FL 33155	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)
				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PANIAGUA, ASTRID 1710 SW 99 AVE MIAMI, FL 33165	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS
				☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)
				☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:		Eddy Gomez		1/9/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		3055055738 Daytime Phone #	