

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005394

FILED
Feb 08, 2009
Secretary of State

Entity Name: RAMS BASEBALL BOOSTER CLUB, INC.

Current Principal Place of Business:

3842 SW 153 PLACE
MIAMI, FL 33185

New Principal Place of Business:

10633 SW 22 TERRACE
MIAMI, FL 33165

Current Mailing Address:

3842 SW 153 PLACE
MIAMI, FL 33185

New Mailing Address:

10633 SW 22 TERRACE
MIAMI, FL 33165

FEI Number: 65-0864489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ENCINOSA, EDUARDO
9021 SW 10 TERRACE
MIAMI, FL 33174 US

Name and Address of New Registered Agent:

PALENZUELA, LILIANA
10633 SW 22 TERRACE
MIAMI, FL 33165 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: LILIANA PALENZUELA

02/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: ENCINOSA, EDUARDO
Address: 9021 SW 10 TERRACE
City-St-Zip: MIAMI, FL 33174

Title: TD () Delete
Name: ENCINOSA, ODETTE
Address: 9021 SW 10 TERRACE
City-St-Zip: MIAMI, FL 33174

Title: VD () Delete
Name: CIFUENTES, CARLOS
Address: 8000 SW 15 STREET
City-St-Zip: MIAMI, FL 33144

Title: SD () Delete
Name: CIFUENTES, ILKA
Address: 8000 SW 15 STREET
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change () Addition
Name: TORRES, PETER
Address: 4150 SW 101 AVENUE
City-St-Zip: MIAMI, FL 33165

Title: TD (X) Change () Addition
Name: PALENZUELA, LILIANA
Address: 10633 SW 22 TERRACE
City-St-Zip: MIAMI, FL 33165

Title: VD (X) Change () Addition
Name: FERIA, BENJAMIN
Address: 401 NW 72 AVENUE APT #101
City-St-Zip: MIAMI, FL 33126

Title: SD (X) Change () Addition
Name: MARTINEZ, LAZARO
Address: 9073 SW 6 STREET
City-St-Zip: MIAMI, FL 33174

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: LILIANA PALENZUELA

TD

02/08/2009

Electronic Signature of Signing Officer or Director

Date