FILED Mar 27, 2003 8:00 am Secretary of State

3/6

| 2003 NO 1-1 | -UK-PKUF | II CURPUI | KATION |
|-----------------|----------------|-----------|---------------|
| UNIFORM | BUSINES | S REPORT | (UBR) |
| | | | -` |

| 1. Entity Nar | IMENT # N98000 WRESTLING CLUB, INC. | 006290 | | | 03-06-2003 90130 045 ****61.25 | | | | |
|---|--|--|---|--|---|---|------------------------|-----------------------------|------------------|
| Principal Place 6332 S.W. BA PALM CITY FE | | Mailing Address 6332 S.W. BANKS TERR. PALM CITY FL 34990 | | | | · | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | CHECK HERE IF MAKING CHANGES | | | | | |
| City & State | | City & State | | | 4. FEI Number 65 | 5-0869194 | | pplied For of Applicable | |
| Zip | Country | Zip | Cou | intry | 5. Certificate of St | | \$8.75 Add | | |
| | 6. Name and Address of Current | Registered Agent | | | 7. Name and Add | ress of New Registered A | gent | | |
| | | | | Name | | | | | |
| | (i, GUY A | | | Street Address (| P.O. Box Number is N | lot Acceptable) | | 252 * 25* | |
| | TY FL 34990 | | | | | ·· | | | |
| FALM CITT PL 34880 | | | | City | | FL | Zip Cod | le | |
| | a named entity submits this statement for | or the purpose of changing its | registere | ed office or register | ed agent, or both, in | the State of Florida. I am f | amiliar with, | and accept | |
| , - | • • | | | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agent | and title if applicable. (NOTE: | Registered | Agent signature required | When reinstating) | DATE | | - | |
| | FILE NOW: FEE IS \$61.25 | 9. Election Cam Trust Fund Co | | · · · | \$5.00 May Be Added to Fees | Make Check Florida Depart | - | | |
| 10. | OFFICERS AND DI | RECTORS | 11. | P | DDITIONS/CHANGE | S TO OFFICERS AND DIR | ECTORS IN | J 10 | |
| TITLE | PD | | | | | Vicare | | ☑ Addition | ଧ |
| NAME | | Delete | TITLE | 1 1.34 | nualD II. I | | Change . | - . | Ā |
| NOME | PIASECKI, GUY | Delete | HILLE | 1 22 | ONALD II. | CKOT CT | Change | ~ | = |
| STREET ADDRESS | PIASECKI, GUY 6332 SW BANKS TERR | Delete : | NAME | T ADDRESS | ONALD J. | CKOT OF | | ESIDEU | Ĕ |
| | | Detete | NAME STREE | ET ADDRESS ST-ZIP 140 | BE SOUND, | CKEY CT - | | ESIDEU | E037(#(|
| STREET ADDRESS | 6332 SW BANKS TERR | De Celete : | NAME STREE | ST-ZIP 140 | BE SOUND, | FC 33485 | | ESIDEU Middillon | R2E037(#1 |
| STREET ADDRESS CITY-ST-ZIP | 6332 SW BANKS TERR PALM CITY FL 34990 | ÷. | NAME STREE CITY- | SI-ZIP 140 | BE SOUND, | FC 33455 | TPE | ESIDEU Middillon | , CR2E037(#0/02) |
| STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | 6332 SW BANKS TERR PALM CITY FL 34990 SD MUNAO, NATE 2400 LAKERIDGE DRIVE | ÷. | NAME STREE CITY- TITLE NAME STREE | SI-ZIP HO | BE SOUND, Lasurer en Means SE Brownin | EC 33455 | TPE | ESIDEU Addition | , CR2E037(#(|
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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: