## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000006531

FILED Sep 01, 2004 Secretary of State

Entity Name: SOUTH FLORIDA FUTBOL LEAGUE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 18914 S.W. 29TH CT. MIRAMAR, FL 33029 **Current Mailing Address: New Mailing Address:** 18914 S.W. 29TH CT. MIRAMAR, FL 33029 FEI Number: 65-0957204 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: PRADO, PAULO 18914 SW 29TH CT MIRAMAR, FL 33029 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MYERS, MICHAEL Name: Name: Address: 9250 NW 36TH STREET Address: City-St-Zip: MIAMI, FL 33178 City-St-Zip: Title: TD Title: () Delete () Change () Addition Name: PRADO, PAUL Name: Address: 18914 SW 29TH COURT Address: City-St-Zip: MIRAMAR, FL 33029 City-St-Zip: Title: () Delete Title: () Change () Addition CRUZ, HOLMES Name: Name: 801 BRICKELL AVE SUITE 800 Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: HADJEZ, CHRIS Name: Address: 8323 SW 12TH ST SUITE 200 Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: Title: Title: () Delete () Change () Addition ZULUETA, MIGUEL Name: Name: 801 BRICKELL AVE SUITE 1000 Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAUL PRADO T 09/01/2004