2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 22, 2005 8:00 am Secretary of State

AIIIIOAE ILEI OITI							Secretary or state					
DOCUMENT # P0000045220 1. Entity Name ALL FAME SPORTS AND ENTERTAINMENT AGENCY, INC.								04-22-2005	•			
Principal Plac	e of Business	+ -	Mailing Address			• •	, ,	مينات رياسه و	ni La		والمراجع والمحاج	
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Principal Place of Business 3. Mailing Address												
1006 N. ARMENIA AVE 1006 N. ARMENIA A										11510 (6010 (1011 CD)	11 1	
Suite, Apt. #, etc. Suite, Apt. #, etc.					1 /10	<u> </u>						
			i i			03142005	Chg-P	CH2E	034 (10/03)			
City & Stat	 8	City & State	City & State			4. FEI Numb	per		Ac	plied For		
TAMPA	L, 4		TAMBA FL				59-364	43932	•	No	t Applicable	
Zip Country			Zip Country							\$8.75 Add	litional	
3360	5 7	ルシム	33607	l u	۶Α		5. Certificat	e of Status Desired		Fee Require		
		and Address of Current F					7. Name an	d Address of New I	Registered	Agent		
Name												
						LO J. JANCHEZ						
1802 W. CLEVELAND ST						Street Address (P.O. Box Number is Not Acceptable) /00						
TAMPA, FL 33606							U. 71 JC/	IGNIA AL	/G			
•]	
Cit							4		FI	Zip Code	e	
8. The above named entity submits this statement for the purpose of changing its registered office or reg							4			<u>- ラジ(</u>	00/	
the obligat	ions of regist	y submits this statement for ered agent.	the purpose or changing its	register	ea office or	register	ed agent, or b	oth, in the State of Fi	orida. Fam	. tamiliar with,	and accept	
the obligations of registered agent.												
SIGNATURE												
	Signature, typed	or printed name of registered agent at	nd title if applicable. (NOT	E: Registere	d Agent signatur	e required	when reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be												
After Ma	ay 1, 2005	5 Fee will be \$550.0	Trust Fund Cont	ribution.		Add	ed to Fees					
10.		OFFICERS AND E	DIRECTORS	11.			ADDITIONS	I S/CHANGES TO OFF	ICERS AN	D DIRECTOR	S IN 11	
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NAME	SANCHEZ, NILO J					NILO	J. 3AN	462	_	E Change	☐ Addition	
STREET ADDRESS	1802 W. CLEVELAND ST							NEWIA AVO	3			
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12. I hereby o	certify that the	e information supplied with	this filing does not qualify for	the exe	mption state	ed in Se	ction 119.07(3)(i), Florida Statutes.	I further ce	rtify that the ir	nformation	
of the cor	poration or th	ne receiver or trustee empor	true and accurate and that r wered to execute this report	as requi	iure snall na ired by Char	ive the s oter 607	same legal effe ', Florida Statut	ect as if made under es; and that my nam	oatn; that I se appears	am an officer in Block 10 or	or director Block 11 if	
of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, 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: 1 / Slor / 879-4600												
SIGNAT	UHE:V	SIGNATURE AND TYPETI OF PE	INTERNAME OF SIGNING OFFICER	OR DIRECT		n'		4113/	OS. V	8 /4-	4600	
			Or Ordinal OFFICER	OU PULED				Date		Jayletia PTIONS #	ı	