## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 01, 2005 08:00 A Secretary of State

ANNUAL REPORT			_	Wiai 01, 2005 0		
DOCUMENT # P000000 1. Entity Name CHAMPION VENTURE PROPER				Se	ecretary of	
Principal Place of Business	Mailing Address		1			
701 BRICKELL AVE STE 3000	701 BRICKELL AVE STE 300	00				
MIAMI, FL 33131	MIAMI, FL 33131		I IZBIGERI (II EEGI)	4617 4433 941/f 681/f 697/f fdf	II WINDE IENEN IINEN ETIINNE EE INSS	
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DO NOT WRITE IN THIS SPACE			<u></u>	No Chg-P CR2	E034 (10/03)	
			4. FEI Number Applied For 65-1032340 Not Applied For			
			5. Certificate of S	tatus Desired	\$8.75 Additional Fee Required	
6. Name and Address of Cu	rrent Registered Agent					
INTRASTATE REGISTERED AGEN	Γ CORP		וא סמ	OT WOL		
701 BRICKELL AVE STE 3000 MIAMI, FL 33131		DO NOT WRITE				
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<ol> <li>The above named entity submits this statem the obligations of registered agent.</li> </ol>	ent for the purpose of changing its regis	stered office or registe	red agent, or both, in	the State of Florida, 1	am familiar with, and accep	
SIGNATURE	agent and title if applicable (NOTE, Regis	stered Agent signature require	d when reinstating)	DA	E	
FILE NOWIII FEE IS \$150.0	9. Election Campaign Fi	inancing \$5	.00 May Be			
After May 1, 2005 Fee will be \$		on. 🔲 Add	ied to Fees			
<del></del>	AND DIRECTORS					
TITLE DPST NAME MOTTOLA, THOMAS D		- {				
STREET ADDRESS 220 EAST 42ND ST, 32ND	FLOOR			معرفه دارا والدراد راديم فعوامه والوا		
CITY-ST-ZIP NEW YORK, NY 10017		<b>∸</b> {	1	######################################	i.÷ C⇔kija lājajaā	
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STREET ADDRESS CITY-ST-ZIP		ŀ				
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12. I hereby certify that the information supplie indicated on this report or supplemental re- of the corporation or the receiver or trustee changed, or on an attachment with an add	d with this filing does not qualify for the cort is true and accurate and that my signature and the street of the street and t	exemption stated in Segnature shall have the equired by Chapter 60	ection 119.07(3)(i), Fl same legal effect as 17, Florida Statutes; a	orida Statutes. I further if made under cath; tha nd that my name appea	certify that the information at I am an officer or director irs in Block 10 or Block 11	
	onu (Maria other like empowered.)		2 .1	(A)		
SIGNATURE:	11000		[23]	<u>(212)</u>	176.5555	