2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Secrétary of State P00000095855 DOCUMENT # 05-28-2002 91651 037 ***150 00 1. Entity Name SOCCER PLACE CAFE, INC. Principal Place of Business Mailing Address 9400 S. DADELAND BLVD., PH #5 37146 9400 S. DADELAND BLVD., PH #5 MIAMI FL 33156-2844 MIAMI FL 33156-2844 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For APPLICA-EOR Not Applicable 01-0720 Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DARROW, ESQ., KENNETH F Street Address (P.O. Box Number is Not Acceptable) 9400 S. DADELAND BLVD., PH #5 MIAMJ FL 33156-2844 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (9/01) TITLE Delete TITLE ☐ Change Addition BERNASCONI, RICARDO NAME NAME 9400 \$ DADELAND BLVD. PH # 5 CR2E034 STREET ADDRESS STREET ADDRESS MIAMI FL 33156-2844 CITY-ST-7IP CITY-ST-ZIP ☐ Addition SVPT ☐ Delete TITLE ☐ Change TITLE ROSEN, ROBERT NAME NAME 8880 SW 67TH COURT STREET ADDRESS STREET ADDRESS MIAM) FL 33156-1700-CITY-ST-ZIP C(TY-\$7-7)P ☐ Change TITLE ☐ Celete TATLE Addition ROSEN, ROBERT NAME NAME 8880 SW 67TH COURT STREET ADORESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33156-1700 CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE Guani, anna lucinda NAME NAME 9400 S DADELAND BLVD. PH # 5 STREET ADDRESS STREET ADDRESS MIAMI FL 33156-2844 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition BERNASCONI, ESTELA NAME NAME 9400 S DADELAND BLVD. PH # 5 STREET ADDRESS STREET ADDRESS MIAMI FL 33156-2844 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE □ Defete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachme

FILED Jul 01, 2002 8:00 am

Davtime Phone #