## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000017055

Name:

Address:

City-St-Zip:

Entity Name: PRO PLAYERS ENTERPRISES, INC.

FILED Sep 08, 2009 Secretary of State

y		TERO ENTERN MOLO, IIV					
Current P	rincipal Plac	e of Business:	New Prin	New Principal Place of Business:			
1348 NW 9 MIAMI, FL	95 ST. APT. 2 33147	01					
Current M	lailing Addre	ss:	New Mail	New Mailing Address:			
1348 NW 9 MIAMI, FL	95 ST. APT. 2 33147	01					
FEI Number:	: 59-3699550	FEI Number Applied For()	FEI Number Not Ap	plicable ( )	Certificate of Status De	esired ( )	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
#459	COREY ISCH BLVD TERRACE, FL	33617 US					
	named entity e of Florida.	submits this statement for th	ne purpose of changing	its registered	office or registered ag	ent, or both,	
SIGNATUR	RE:						
	Electro	nic Signature of Registered .	Agent	Date			
		93(2)(b), F.S., the corporation dienger of the corporation dienger of the contribution ( ).	d not receive the prior noti	ce.			
OFFICERS	S AND DIREC	CTORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CURRY, COR 5470 E BUSCI	) Delete EY C H BLVD SUITE 459 RACE, FL 33617	Title: Name: Address: City-St-Zip:	P BROWN, NIC 1348 NW 95 MIAMI, FL 33	ST		
Title: Name: Address: City-St-Zip:	WILLIAMS, MA 5470 E BUSCI	) Delete ARTELL H BLVD SUITE 459 RACE, FL 33617	Title: Name: Address: City-St-Zip:	VP BROWN, SHA 1348 NW 95 MIAMI, FL 33	ST		
Title: Name: Address: City-St-Zip:	JOHNSON, TO 5470 E BUSCI	) Delete MMY H BLVD SUITE 459 RACE, FL 33617	Title: Name: Address: City-St-Zip:	MGR WILLIAMS, N 1348 NW 95 MIAMI, FL 33	ST		
Title:	(	) Delete	Title:	MGR	( ) Change (X) Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

CURRY, COREY

1348 NW 95 ST

MIAMI, FL 33147

SIGNATURE: NICOLE ANN MARIE BROWN P 09/08/2009