2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State
03-17-2003 90470 019 ***150.00

DOCUMENT # P01000115101

1. Entity Name
PRO-ATHLETES INC.

Principal Place of Business	Mailing Address
~~GRAND BAY PLAZA, SUITE 200~~ ~~2665 SOUTH BAYSHOE DRIVE~~ ~~MIAMI FL 33133~~	~~GRAND BAY PLAZA, SUITE 200~~ ~~2665 SOUTH BAYSHOE DRIVE~~ ~~MIAMI FL 33133~~

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
1221 Brickell AVE	SAME
Suite, Apt. #, etc. 1020	Suite, Apt. #, etc.
City & State Miami, FL	City & State
Zip 33131	Country USA
Zip	Country

4. FEI Number APPLIED FOR ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
QUINTERO, FRANK JR. PA ~~GRAND BAY PLAZA, SUITE 200~~ ~~2665 SOUTH BAYSHOE DRIVE~~ ~~MIAMI FL 33133~~ 1221 Brickell AVE SUITE 1020 Miami, FL 33131	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD QUINTERO, FRANK JR. ~~2665 S. BAYSHORE DRIVE~~ ~~MIAMI FL 33133~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 1221 BRICKELL AVE SUITE 1020 Miami, FL 33131
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSTD BORGES, SERGIO ~~2665 S. BAYSHORE DRIVE~~ ~~MIAMI FL 33133~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 1221 Brickell AVE SUITE 1020 Miami, FL 33131
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VPD~~ ~~CABREJA, ALEXIS~~ ~~2665 S. BAYSHORE DRIVE~~ ~~MIAMI FL 33133~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ronaldo Requiro 3/5/03 (305)446-0303
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #