2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 17, 2008 8:00 am Secretary of State

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DOCUMENT # P02000049535 1. Entity Name ALBION SOCCER USA INC.						03-17-200	_		
Principal Place 4243 S.W. M. PALM CITY, F	ALLARD CREEK TRAIL	Mailing Address 4243 S.W. MALLARD CREEK TRAIL PALM CITY, FL 34990		400-	- Bije ijen be iji be jij b	S) 88 8 1 1		181 II (FS)	
2, Principal Pl	lace of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	03092008	Chg-P	CR2E0	34 (12/06)	
City & State		City & State			4. FEI Number 74-3043551				plied For t Applicable
Zip	Country	Zip	Zip Country		5. Certificate o	f Status Desired		\$8.75 Add Fee Required	
	6. Name and Address of Curren		7. Name and Address of New Registered Agent						
GIBBONS, PAUL A 4243 S.W. MALLARD CREEK TRAIL PALM CITY, FL 34990				Name Street Address (P.O. Box Number is Not Acceptable)					
			City	/			FL	Zip Code	•
	Signature, typed or printed name of registered ager E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550	9. Election Campa	•	\$5.	.00 May Be ed to Fees		DATE		
10.	· OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OF	FFICERS AND	DIRECTORS	S IN 11
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 🔽

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13tIMALOB

Daytime Phone #