2005 FOR PROFIT CORPORATION

May 02, 2005 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P02000135050 GALIFUTBOL SOCCER OUTLET, INC. Principal Place of Business Mailing Address 7800 CAMINO REAL #105 7800 CAMINO REAL #105 MIAMI, FL 33143 MIAMI, FL 33143 04292005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 42-1566463 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GALINDO, JOSE A DO NOT WRITE 1544 W FLAGLER STREET MIAMI, FL 33135 IN THIS SPACE 8. The above named entity submits this statement to 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. JOSE A. GALLNDO SIGNATURE ignature, typed or proted name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS PTD TITLE GALINDO, JOSE A NAME 7800 CAMINO REAL #105 STREET ADDRESS CITY ST - ZIP MIAMI, FL 33143 U00000352350 VSD TITLE 05/03/05-80023-022 150.00 BUSTILLO, MIRIAM I NAME 7800 CAMINO REAL #105 STREET ADDRESS CITY - ST - ZIP MIAMI, FL 33143 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP JULE NAME STREET ADDRESS CITY-S1-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 of 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:XXX

JOSE A. CALLUDAP 4/89/05

Daytime Phone #

FILED