## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P03000061696

1. Entity Name

ULTIMATE OPA SPORTS INC.



## FILED Apr 12, 2006 8:00 am Secretary of State

04-12-2006 90080 008 \*\*\*150.00

					- CO.	TELEVISION						
Principal Place 12705 NW 4 OPA LOCKA,	2ND AVE.	S.	Mailing Address 710 SE 3RD AVE HALLANDALE, FL 33009			1 ( <b>22</b> (188) III	<b>i dina</b> kirik <b>da</b> rki <b>ka</b> lik <b>ab</b> ik		<b></b>	7881 II 1881		
2. Principal Pl	lace of Busin	ness	3. Mailing Address									
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			03252006	Chg-P	CR2E03	4 (11/05)			
City & State			City & State				4. FEI Number Applied For 83-0360717 Not Applicable					
Zip		Country	Zip	niry		5. Certificate of Status Desired S8.75 Additional Fee Required			litional			
	6. Name	and Address of Current I	Registered Agent				7. Name and Address of New Registered Agent					
						Name						
BEN YAIR 7488 NW 1 PEMBROK	7TH DR.			Street Address (P.O. Box Number is Not Acceptable)								
					City				FL Zip Code			
ļ												
8. The above named entity submits his 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 renstating)  DATE												
FILE NOW!!! FEE I\$ \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees												
10.		OFFICERS AND	DIRECTORS	11.			ADDITIONS/	CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11	
TITLE	D Delete Tiff							DAUL		Change	Addition	
NAME	BEN YAIR, DAVID					BEN	ם <i>באוא</i> נבט		•	Z Grienge	☐ ∧¢okion	
STREET ADDRESS 7488 NW 17TH DR.				EET ADDRESS	710	SE 3M	Ave	_				
CITY-ST-ZIP PEMBROKE PINES, FL 33024				r-ST-ZIP	Ha	Houdel	p 2/1 33	3009				
		11 11460, 16 33024			- 01-21	11w	umour	c /00 00		v=/		
TITLE	D	D DDANING	Delete	TITL	.E.	200	Wicho ?	RRANNY		Change	Addition	
NAME STREET ADDRESS	BEN YAIR, BRANNY			NAN	EET ADDRESS	יושעני	SE SAL	Ave.				
CITY-ST-ZIP	7488 NW 17TH DR.   PEMBROKE PINES, FL 33024			1	-ST-ZIP	110	1000	DAVID AVE E HL 33 BAANNY AVE E HL 33	2005			
	PENIBRO	-		Hu	nimair	C 74 J	<i></i>					
TITLE			☐ Delete	TITL						Change	Addition	
NAME CIDICI ADDRECE				NAM								
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS Y-SI-ZIP							
TITLE NAME			☐ Delete	JTIT Man						Change	☐ Addition	
STREET ADDRESS					EET ADDRESS							
CITY-ST-ZIP					Y-ST-ZIP							
TITLE			☐ Delete	ПΤЪ			<u> </u>			☐ Change	Addition	
NAME			Li Delete	NAN						☐ Grange		
STREET ADDRESS					EET ADDRESS							
CITY-ST-ZiP	1				Y-ST-ZIP							
TITLE			☐ Delete	TITL	.E					☐ Change	Addition	
NAMÉ			- D01010	NAK	I							
STREET ADDRESS				STR	EET ADDRESS							
CITY-ST-ZiP				CIT	Y-ST-ZIP							
12. I hereby	certify that th	e information supplied with	this filing does not qualify f	or the ex	emptions co	ontained	d in Chapter 119	. Florida Statutes I	further cert	fy that the i	nformation	

12. I hereby certify that the internation 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 only; that I am an officer or director of the corporation or the receiver or trusted impowered 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 appears, with all other like empowered.

**SIGNATURE** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AiR 4/4/

305-769-726

Daytin-e Phone #