

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

04-16-2004 90061 043 ***150.00

DOCUMENT # P03000070022 1. Entity Name FAIR PLAY PROMOTIONS, INC.					
Principal Place of Business 16353 NW 22 ST PEMBROKE PINES, FL 33302			Mailing Address 16353 NW 22 ST PEMBROKE PINES, FL 33302		
2. Principal Place of Business 16353 NW 22nd St.		3. Mailing Address 16353 NW 22nd St.			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State Pembroke Pines, Florida		City & State Pembroke Pines, FL 33028		4. FEI Number 20-0812138	
Zip 33028		Country USA		☒ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent JIMENEZ, MARIO A 16353 NW 22 ST PEMBROKE PINES, FL 33302			7. Name and Address of New Registered Agent Name Mario A. Jimenez Street Address (P.O. Box Number is Not Acceptable) 16353 NW 22nd St. City Pembroke Pines		
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 <i>[Signature]</i> Maria H. Ramos 4/12/04 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, 2004 Fee will be \$550.00			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	D ☐ Delete JIMENEZ, MARIO A 16353 NW 22 ST PEMBROKE PINES, FL 33302		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jimenez Mario A. ☒ Change ☐ Addition 16353 NW 22nd Street. Pembroke Pines, FL 33028	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete JIMENEZ, MARIO ANDRES 16353 NW 22 ST PEMBROKE PINES, FL 33302		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jimenez, Mario Andres ☒ Change ☐ Addition 16353 NW 22nd Street Pembroke Pines, FL 33028	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete RAMOS, MARIA H 16353 NW 22 ST PEMBROKE PINES, FL 33302		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ramos, Maria H. ☒ Change ☐ Addition 16353 NW 22nd Street Pembroke Pines, FL 33028	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Delete RAMOS, MARIO ANDRES H 16353 NW 22 ST PEMBROKE PINES, FL 33302		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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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: <i>[Signature]</i> Maria H. Ramos 4/12/04 (754) 246 4190 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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04052004 Chg-P CR2E034 (10/03)