2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 14, 2006 08:00 AM Secretary of State DOCUMENT # P04000036079 1. Entity Name COOKIE STEVENS VOLLEYBALL CAMP'S INC.

Mailing Address

Principal Place of Business 10585 SW 100TH ST. MIAMI, FL 33176

10585 SW 100TH ST. MIAMI, FL 33176



CR2E034 (11/05)

Fee Required

DO NOT WRITE IN THIS SPACE

4. FEI Number		Applied For
43-2044901		Not Applicab
5. Certificate of Status Desired	\$8.75	Additional

april 7, 2006 786-250-12

6. Name and Address of Current Registered Agent

MARKOWSKI, KIMBERLY 5901 SW 74TH ST., #403 MIAMI, FL 33143

DO NOT WRITE IN THIS SPACE

No Chg-P

04082006

		(
8. The above the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	d office or re	egistered agent, or bo	otin, in the State of Florida I am familiar with, and accept
SIGNATURE	Signature, typest or printed name of registered agent and title	l'applicable (NOTE Registeres	Agent signatura	required when reinstaling)	· · · · · · · · · · · · · · · · · · ·
	E NOWIII FEE 18 \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May 6e Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEVENS, COOKIE 10585 SW 100TH ST. MIAMI, FL 33178				U00000508318 04/27/06-80038-006 150.0
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE MAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby of indicated of the corchanged,	certify that the information supplied with this ti on this report or supplemental report is true a poration or the receiver or trustee empoweres or on an attachment with an address, with al	iling does not qualify for the exe and accurate and that my signat d to execute this report as requir I other like empowered.	mptions cor ure shall haved by Chap	ntained in Chapter 11 re the same legal effe ter 607, Florida Statut	 Florida Statutes. I further certify that the information of as if made under oath, that I am an officer or director es; and that my name appears in Block 10 or Block 11 if