

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005 8:00 am
Secretary of State

01-10-2005 90047 011 ***150.00

DOCUMENT # P04000074131

1. Entity Name
TEL-NET SPORTS, CORP.



Principal Place of Business
11825 SW 105TH TERRACE
MIAMI, FL 33186

Mailing Address
11825 SW 105TH TERRACE
MIAMI, FL 33186



2. Principal Place of Business
3403 NW 82 Ave.

3. Mailing Address
3403 NW 82 Ave.

Suite, Apt. #, etc.
100

Suite, Apt. #, etc.
100

01062005 Chg-P CR2E034 (10/03)

City & State
DORAL FL

City & State
DORAL FL

4. FEI Number
20-1096729

Applied For
Not Applied

Zip
33122 Country
MIAMI DADE

Zip
33122 Country
MIAMI DADE

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROMERO, LEONEL
11825 SW 105TH TERRACE
MIAMI, FL 33186

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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, 2005 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 PD
STREET ADDRESS ROMERO, LEONEL
CITY - ST - ZIP 11825 SW 105TH TERRACE
MIAMI, FL 33186 ☐ Delete

TITLE
NAME ☐ Change ☐ Add
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY - ST - ZIP

TITLE VS
NAME BERECHÉ, OSCAR ☐ Change ☒ Add
STREET ADDRESS 1135 97th Apt. 1
CITY - ST - ZIP BAY HARBOR ISLANDS, FL 33154

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME ☐ Change ☐ Add
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME ☐ Change ☐ Add
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME ☐ Change ☐ Add
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME ☐ Change ☐ Add
STREET ADDRESS
CITY - ST - ZIP

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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

OSCAR BERECHÉ
Vice President

01/06/2005

(305) 871-2525

Date

Daytime Phone #