

FILED
Apr 28, 2008 08:00 AM
Secretary of State

1. Entity Name
FUTBOL FACILITIES INC.



Mailing Address
7444 SW 48TH STREET
MIAMI, FL 33155

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4. FEI Number 20-1898129	Applied For
	Not Applicable

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

MULROY, THOMAS P
7444 SW 48TH STREET
MIAMI, FL 33155

**DO NOT WRITE
IN THIS SPACE**

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

9. Election Campaign Financing **\$5.00** May Be
Trust Fund Contribution. ☐ Added to Fees

DATE	DESCRIPTION	AMOUNT
05/20/08	80016-001	158.75

TITLE	D
NAME	MULROY, THOMAS P
STREET ADDRESS	7444 SW 48TH STREET
CITY - ST - ZIP	MIAMI, FL 33155
TITLE	D
NAME	MULROY, PAOLA
STREET ADDRESS	7444 SW 48TH STREET
CITY - ST - ZIP	MIAMI, FL 33155
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/05

305 669 0101