

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000062383

FILED
Jul 15, 2007
Secretary of State

Entity Name: IMPACT PLAYER BASEBALL ACADEMY INC.

Current Principal Place of Business:

16229 SAWGRASS CIR.
TAMPA, FL 33624

New Principal Place of Business:

17053 TORVEST CT
LAND O LAKES, FL 34639

Current Mailing Address:

16229 SAWGRASS CIR.
TAMPA, FL 33624

New Mailing Address:

17053 TORVEST CT
LAND O LAKES, FL 34639

FEI Number: 32-0147396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTEGA, JOSE M
15538 TIMBERLINE DR.
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

ORTEGA, JOSE M
17053 TORVEST CT
LAND O LAKES, FL 33624 US

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.

SIGNATURE: REBECCA ORTEGA

07/15/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ORTEGA, JOSE M
Address: 15538 TIMBERLINE DR
City-St-Zip: TAMPA, FL 33624 US

Title: VP () Delete
Name: ORTEGA, REBECCA C
Address: 15538 TIMBERLINE DR
City-St-Zip: TAMPA, FL 33624 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ORTEGA, JOSE M
Address: 17053 TORVEST CT
City-St-Zip: LAND O LAKES, FL 34639 US

Title: VP (X) Change () Addition
Name: ORTEGA, REBECCA C
Address: 17053 TORVEST CT
City-St-Zip: LAND O LAKES, FL 34639 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REBECCA ORTEGA

VP

07/15/2007

Electronic Signature of Signing Officer or Director

Date