2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000109534

City-St-Zip:

CORAL GABLES, FL 33134 US

COALITION DOVING INC

FILED May 04, 2007 Secretary of State

| Entity Nan | ne: COALITION E | BOXING, INC. | | | |
|---|---|---|---|---|--|
| Current Principal Place of Business: | | | New Principal Place of | New Principal Place of Business: | |
| 2800 PONCE DE LEON BLVD. | | | | | |
| SUITE 116 CORAL GA | 0 \BLES, FL 33134 | US | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| SUITE 116 | CE DE LEON BLV 0 ABLES, FL 33134 | D. US | | | |
| FEI Number: | FI | El Number Applied For (X) | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| NAVARRO & CARMONA, P. L. 2800 PONCE DE LEON BLVD. SUITE 1160 CORAL GABLES, FL 33134 US | | | 2800 PONCE DE LEOI SUITE 1160 | LUIS F. NAVARRO P.A. 2800 PONCE DE LEON BLVD. SUITE 1160 CORAL GABLES, FL 33134 US | |
| The above in the State | | nits this statement for the p | urpose of changing its registered | d office or registered agent, or both, | |
| SIGNATURE: LUIS F. ANVARRO P.A. | | | | 05/04/2007 | |
| | Electronic S | ignature of Registered Age | ent | Date | |
| | | b), F.S., the corporation did no st Fund Contribution (). | t receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | D () Dele THE COALITION, LL 2800 PONCE DE LE CORAL GABLES, FI | C, ON BLVD. SUITE 1160 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | P/C () Dele NAVARRO, LUIS F 2800 PONCE DE LE CORAL GABLES, FI | ON BLVD. | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | S () Dele NAVARRO, OLGA 2800 PONCE DE LE | | Title: Name: Address: | () Change () Addition | |

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.

City-St-Zip:

SIGNATURE: LUIS F. ANVARRO P.A. MR 05/04/2007