

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000120882

FILED
Nov 10, 2009
Secretary of State

Entity Name: UPPERCUT SPORTS MANAGEMENT, CORP.

Current Principal Place of Business:

7951 SW 40TH STREET STE 206
MIAMI, FL 33155

New Principal Place of Business:

7825 SW 53 PLACE
MIAMI, FL 33143

Current Mailing Address:

7951 SW 40TH STREET STE 206
MIAMI, FL 33155

New Mailing Address:

7825 SW 53 PLACE
MIAMI, FL 33143

FEI Number: 71-0115414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, OSVALDO J
7951 SW 40TH STREET STE 206
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

DIAZ, OSVALDO J
7825 SW 53 PLACE
MIAMI, FL 33143 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: LISSETTE S BURNS

11/10/2009

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: DPS () Delete
Name: BURNS, LISSETTE S
Address: 7951 SW 40TH STREET STE 206
City-St-Zip: MIAMI, FL 33155

Title: DVT () Delete
Name: BURNS, PATRICK
Address: 7951 SW 40TH STREET STE 206
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: BURNS, LISSETTE S
Address: 7825 SW 53 PLACE
City-St-Zip: MIAMI, FL 33143

Title: DVT (X) Change () Addition
Name: BURNS, PATRICK
Address: 7825 SW 53 PLACE
City-St-Zip: MIAMI, FL 33143

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: LISSETTE S BURNS

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11/10/2009

Electronic Signature of Signing Officer or Director

Date