## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000045272

Entity Name: SOCCER FIESTA, INC

525 FLEMING AVE

GREENACRES, FL 33463

Address: City-St-Zip:

**FILED** Mar 13, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4057 LAKE WORTH RD 525 FLEMING AVE LAKE WORTH, FL 33461 GREENACRES, FL 33463 **Current Mailing Address: New Mailing Address:** 4057 LAKE WORTH RD 525 FLEMING AVE LAKE WORTH, FL 33461 GREENACRES, FL 33463 FEI Number: 01-0861247 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: GVS ENTERPRISE SERVICE CORP. GVS ENTERPRISE SERVICE CORP. 834 W LANTANA RD 3923 LAKE WORTH RD LANTANA, FL 33462 US 201 LAKE WORTH, FL 33461 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: ROXANA M VILLALTA 03/13/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition RIQUELME, ABEL Name: Name: 525 FLEMING AVE Address: Address: City-St-Zip: GREENACRES, FL 33463 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition URIOSTEGUI, ARGELIA Name: Name: 525 FLEMING AVE Address: Address: GREENACRES, FL 33463 City-St-Zip: City-St-Zip: Title: Title: TS () Delete () Change () Addition RIQUELME, ABEL JR Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: ABEL RIQUELME MG 03/13/2009