

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 29 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000026974 (2)

1. Corporation Name

FLANKS SOCCER CORPORATION



Principal Place of Business

Mailing Address

4201 INDIAN CREEK DRIVE  
SUITE 7  
MIAMI FL 33140  
US

4201 INDIAN CREEK DRIVE  
SUITE 7  
MIAMI FL 33140  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 7125 BAY DR E

Suite, Apt. #, etc.

22 # 407

City & State

23 MIAMI BEACH, FL

Zip

24 33141

Country

25 USA

2a. Mailing Address

26 1295 NE 14 AVE

Suite, Apt. #, etc.

27

City & State

28 MIAMI, FL

Zip

29 33132

Country

30 USA

3. Date Incorporated or Qualified

04/05/1995

4. FEI Number

65-0570487

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

MACDANIEL, JOHN M  
ONE BISCAYNE TOWER, SUITE 2975  
TWO SOUTH BISCAYNE BLVD.  
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

PAULO E. DE SOUZA

82 Street Address (P.O. Box Number is Not Acceptable)

7125 BAY DR E # 407

83

84 City

MIAMI BEACH

FL

85 Zip Code

33132

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:

*Paulo E. de Souza*

(NOTE: Registered Agent signature required when reinstating)

*Paulo E. de Souza*

4-22-98

Signature, typed or printed name of registered agent and title if applicable

DATE

12.

OFFICERS AND DIRECTORS

TITLE VS ☐ DELETE

NAME FIDALGO PINHEIRO, LUCIA H  
STREET ADDRESS 4201 INDIAN CREEK DRIVE  
CITY-ST-ZIP MIAMI FL 33140

TITLE P ☐ DELETE

NAME DE SOUZA, PAULO E  
STREET ADDRESS 4201 INDIAN CREEK DRIVE  
CITY-ST-ZIP MIAMI FL 33140

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

7125 BAY DR. E #407  
MIAMI BEACH FL 33141

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

7125 BAY DR. E #407  
MIAMI BEACH FL 33141

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Paulo E. de Souza*

4-22-98

(205) 377 4544

CR2E034 (10/97)