## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



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

1996

STREET ADDRESS

**DOCUMENT #** 

P95000038912 (8)

MAJOR LEAGUE HEROS, INC.

Principal Place of Business Mailing Address							i Durii Duii Duii	<b>UBING 11181 (UIIB 18</b>	<b>                                    </b>	
2641 PARK PEMBROKE	ROAD PARK FL 33009	2641 PARK ROAD PEMBROKE PARK FL 33009								
					3. [	Date Incorporated or Qu 05/16/1995	alified 3a.	Date of Last Re	eport	
2. Principal Pla		2a. Mailing Address		54. 4.		El Number	799		Applied For	]
21 953		26 953 w Co Suite, Apt. #, etc.	MMERC	IAL DO	19 6	25 -0390°	<i>! ! {</i>		Not Applicable Additional	╣
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. (	Certificate of Status Des	ired 🔲	•	Required	
City & State  City & State  City & State  City & State  28 FT LAWLER			edale,	FLORID		lection Campaign Finar Frust Fund Contribution	noing	* * * * *	May Be I to Fees	
Zip	Country	Zip	Cour		- 1	This corporation has liat			199,032,	
24 3330	25 USA 9. Name and Address of Current	29 333 09	30	USA		lorida Statutes Name and Address of	Yes Now Pagists			-
	9. Name and Address of Current	Hedistelen Manit		B1 Name	10. 1	Name and Address of	now nogist	neo Agent		-
POTEL	LA, GARY J				(0.0	Day Number is Not 6	nantable)			4
	IST BROWARD BLVD.		1	82 Street A	Address (P.C	). Box Number is Not A	cceptable)			
	OUSE II		Ī	83						1
FT. LAI	UDERDALE FL 33394		}	84 City				85 Zig	Code	+
								FLI		_
or registers	o the provisions of Sections 607.0502 and agent, or both, in the State of Florida	s. Such change was authoriz	ed by the c	re-named co orporation's	orporation su board of dire	bmits this statement for ectors. I hereby accept	the purpose of the appointme	of changing its r int aş registered	egistered office agent. I am	1
familiar witl	h, and accept the obligations of Section	n 607.0505, Florida Statutes	5.				5.4	-101		
SIGNATURE _	Signature, typed or printed name of registered agent a	rd title if applicable (NC	TE: Registered	Agent signature re	eculred when rein	stating)		15/96 ATE		
12.	OFFICERS AND DIRECTORS		13.	13.		ADDITIONS/CHANGES	TO OFFICERS	AND DIRECTO		CR2E034 (12/95)
TITLE	PSTD	DELETE	1.1 Tr	ILE	Vρ			☐ Chançe	Addition	12
NAME	MONTALDO, ANTHONY		1.2 NA	1.2 NAME MC		ALDO, PHYLL	15	. A		18
STREET ADDRESS	2641 PARK ROAD			REET ADDRESS	MONTALDO PHYLLIS  953 W COMMERCIAL  FORT LAUDERDME		IAL BL	61 33309		18
CITY - ST - ZIP	PEMBROKÉ PARK FL 33009 VD	DELETE	1.4 C/I 2. 1 T/	IY-ST-ZIP	FOR-	t camperda	u, rc	Chance	☐ Addition	⊣წ
TOTLE NAME	GARRANCHÀN, RAYNER	Ditter.	2.2 NA					onanto		
STREET ADDRESS	2705 N.E. 165TH STREET			REET ADDRESS						-
CITY - ST - ZIP	N MIAMI BEACH FL 33160			ry-St-ZIP						
TITLE		☐ DELETE	3 1 Ti	ſLE				Change	☐ Addition	7
NAME			3 2 NA	ME						
STREET ADDRESS				REET ADDRESS						
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NAME STREET ADDRESS				REET ADDRESS						
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NAME			5.2 NA	ME						
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CiTY-ST-ZIP			5.4 CI	TY-ST-ZIP						
11TLE		DELETE	6. 1 YI					Change	Addition	
NAME			6.2 NA					•		
STREET ADDRESS			6.3 ST	REET ADDRESS	l					1

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 if changed, or on an attachment with an address. SIGNATURE:

6.4 DITY-ST-ZIP