

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000050980

FILED
May 14, 2007
Secretary of State

Entity Name: SOUTH FLORIDA BOXING COMPANY

Current Principal Place of Business:

715 WASHINGTON AVENUE
2ND FLOOR
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

715 WASHINGTON AVENUE
2ND FLOOR
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-0840992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CEDAR, TREVOR N
270 GRANCONCOURSE
MIAMI SHORES, FL 33138 US

Name and Address of New Registered Agent:

CEDAR, TREVOR N
800 WEST AVE. APT# 845
MIAMI BEACH, FL 33139 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: T.CEDAR

05/14/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CEDAR, TREVOR N
Address: 715 WASHINGTON AVENUE
City-St-Zip: MIAMI BEACH, FL 33139

Title: S (X) Delete
Name: CEDAR, JOLIE D
Address: 270 GRANDCONCOURSE
City-St-Zip: MIAMI SHORES, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: T.CEDAR

P

05/14/2007

Electronic Signature of Signing Officer or Director

Date