2004 FOR PROFIT CORPORATI **ANNUAL REPORT**

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ON	Aug 03, 2004 8:00 am Secretary of State
THE STA	08-03-2004 90008 024 ***150.00

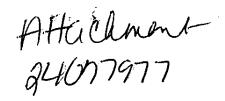
DOCUMENT # P99000013472 TARIK SPORTS CONSULTING SERVICES, INC. 24011011 Principal Place of Business Mailing Address 6606 VILLA SONRISA #921 6606 VILLA SONRISA #921 BOCA RATON, FL 33433 BOCA-RATON, FL 33433 3. Mailing Address 22232 Woodborn DR 2. Principal Place of Business Suite, Apt. #, etc Suite, Apt. #, etc. 07202004 CR2E034 (10/03) Chg-P City & State 4 EEL Number Applied For City & State 65-0896215 Not Applicable Country USA Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MULLIN, JAMES & Street Address (P.O. Box Number is Not Acceptable) 2080 NW BOCA RATON BLVD #6 BOCA RATON, FL 33431 8. The above named entity submits nis statement for the purpose of changing its registered offico or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered SIGNATURE. Signature, typ of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) /50.00 FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Addition TITLE ☐ Delete ☐ Change BENHABILES, TARIK NAME NAME 6606 VILLA SONRISA #921 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33433 CITY-ST-ZIP THTLE ☐ Addition ☐ Delete ☐ Change TITLE BENHABILES, CLELIA C NAME NAME STREET ADDRESS 6606 VILLA SONRISA #921 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCA RATON, FL 33433 Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change TITE F ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Defete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPEDO RINTED NAME OF SIGNING OFFICER

J MULLIN TAX SERVICE, INC.

22232 WOODBORN DRIVE BOCA RATON, FLORIDA 33428 561-218-1768



July 2004

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re:

Tarik Sports Consulting Services, Inc.

Doc.#P99000013472

Dear Sir or Madam:

Please accept the enclosed check of \$150.00 as the filing fee for the above corporation's 2004 Annual Report filing fee.

The above corporation's previous accounting firm never informed the corporate owner that this fee was due and owning to the State of Florida.

We are correcting that problem by having our address listed as the mailing address, so this problem will not occur in the future.

The properly filled out Annual Report form is also enclosed and signed by the corporate representative.

Thank you for your assistance in this matter.

Sincereb

Laurel Adler, Vice President, Pres.