2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

S83467 DOCUMENT

1. Entity Name

BIG LEAGUE PROMOTIONS CORP



FILED Mar 17, 2003 8:00 am \$\frac{3}{2}\$ Secretary of State

03-17-2003 90655 010 ***150.00

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Surie, Apt. 9, etc. Surie, Apt. 9, ofc. CheCk HERE IF MAKING CHANGES City & State Chry & State A. FEI Number 65-0288223 Applied Fig. 1 Zp Country Zp Country 5, Contillicate of Status Desired 68-76 Additional Fig. 1 ShaPIRO, BRENDA Steet Additional Fig. 1 Isola SW 21ST TERRACE Steet Additional Fig. 1 MAMI FL 33145 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the Steet of Florids. I am familiar well*, and acceptable SIGNATURE Signature, types or primore immediately submits this statement for the purpose of changing its registered office or registered agent, or both, in the Steet of Florids. I am familiar well*, and acceptable SIGNATURE Signature, types or primore immediately submits this statement of the purpose of changing its registered office or registered agent, or both, in the Steet of Florids. I am familiar well*, and acceptable SIGNATURE Signature, types or primore immediately submits this statement of the purpose of changing its registered office or registered agent, or both, in the Steet of Florids. I am familiar well*, and acceptable SIGNATURE Signature, types or primore immediately submits this statement of the purpose of changing its registered office or registered agent, or both, in the Steet of Florids. I am familiar well*, and acceptable SIGNATURE Signature, types of primore immediately submits this statement of the purpose of changing its registered agent. I must have been submitted agent. I must hav	1974 NW 82ND AVE MIAMI FL 33126		1974 NW 82ND AVE MIAMI FL 33126			1 1 1 1 1 1 1 1 1 1		
City & State Name Shaping Free Address of New Registered Agent Name Shaping Free Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City F	2. Principal F	Place of Business	3. Mailing Address			- 		HANK DIONE HOUR
Country Zip Country Zip Country Zip Country S. Certification of Satus Desired \$3.75 Additional Foo Required \$3.75 Additional Foo Required	Suite, Apt.	#, etc	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKI	NG CHANGES	
S. Certificate of Status Desired Status Desired Store Number Status Desired Store Number Status Sta	City & State		City & State		4. FEI Number 65-0288223		pplied For ot Applicable	
SHAPIRO, BRENDA 1861 SW 21ST TERRACE MIAMI FL 33145 8. The above named entry submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accident the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Pea will be \$550.00 After May 1, 2003 Pea will b	Zip Country		Zip Count			5. Certificate of Status Desired \$8.75 Additional		
SHAPIRO, BRENDA 1861 SW 21ST TERRACE MIAMI FL 33145 8. 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. I am lamiliar with, and accident the obligations or registered agent. SIGNATURE Signature Sig		6. Name and Address of Current	Registered Agent	legistered Agent		7. Name and Address of New Registered Agent		
Street Address (PO. Box Number is Not Acceptable) Street Address (PO. Box Number is Not Acceptable)					Name			
8. The above named entry submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SigNarute Speciment Appentations of registered agent (NOTE Registered Apent signature required when ministating) DATE			Street Address		P.O. Box Number is Not Acceptable)			
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accidente obligations of registered agent. SIGNATURE	MIAMI FL	33145						
SIGNATURE SIGNATURE				1	•	_	ĭ┗ │ ˈ	į.
After May 1, 2003 Fee will be \$55,00 May Make Check Payable to Florida Department of State 10.	the obligat	ions of registered agent. Signature, typed or printed name of registered agent						and accept
TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP Change Add NAME STREET ADDRESS CITY-ST-ZIP ADDRESS CITY-ST-ZIP Change Add NAME STREET ADDRESS CITY-ST-ZIP A	Afte	r May 1, 2003 Fee will be \$550.00		- * *			□ \$5:0 □ Added	00 May Be d to Fees
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	NAME STREET ADDRESS	BRICKMAN, KENNETH 1717 N. BAYSHORE DR. #3351	☐ Delete	NAME STREET A		W- L.	☐ Change	☐ Addition
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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 a corporation of the corp

SIGNATURE:

Kenneth Brickman