## 2008 FOR PROFIT CORPORATION

## Mar 24, 2008 08:00 Al ANNUAL REPORT DOCUMENT # S95686 **Secretary of State** 1. Entity Name SLUGGERS, INC. Mailing Address Principal Place of Business 2201 SW 117TH AVENUE 2201 SW 117TH AVENUE MIAMI, FL 33165 US MIAMI, FL 33165 US 01212008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0376365 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SANCHEZ, REMBERTO DO NOT WRITE **2201 SW 117TH AVENUE** MIAMI, FL 33165 IN THIS SPACE 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 familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE 94/09/08-80036-013 150.00 9. Election Campaign Financing \$5.00 May Be . FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PD TITLE SANCHEZ, REMBERTO NAME STREET ADDRESS 2201 SW 117TH AVENUE CITY-ST-ZIP MIAMI, FL 33165 TITLE SUAREZ, RALPH NAME 1055 WEST 36TH PLACE STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33012 TITLE NAME QUNITANA, MIGUEL O STREET ADDRESS 22 NW 133 PLACE DO NOT WRITE MIAMI, FL 33182 CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

I hereby certify that the information supplies with this filing does not qualify for the exemptions contained 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 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 his poor as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment v

SIGNATURE:

NATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED