PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT	#
DOCUMENT	\boldsymbol{n}
 Corporation Name 	

F95000005429 (4)

ADVENTURE GOLF & GAMES, INC.

Principal Place o	if Business
-------------------	-------------

Mailing Address

120 EAST 56TH STREET, STE. 835 NEW YORK NY 10022 120 EAST 56TH STREET. STE. 835



NEW YORK	NY 10022		NEW YORK NY 10022				
							3. Date Incorporated or Qualified 3a. Date of Last Report
							11/06/1995 Initial
2. Principal Pla	ace of Business	2a	, Mailing Address				4. FEI Number Applied For
21 305 W	. 4th Street, Suit	e 200 26	305 W. 4	th Street	1		13 - 3656515 Not Applicable
	Suite, Apt. #, etc. Suite, Apt. #, etc.			\$8.75 Additional			
h—n •	200	27	<u>├</u> ──				5. Certificate of Status Desired Fee Required
City & State			City & State				6. Election Campaign Financing \$5.00 May Be
	ston - Salem	NC 28	Winston-	Salem		NC.	Trust Fund Contribution Added to Fees
Zip	Country	/	Zip	Coun			8. This corporation has liability for intangible tax under s 199.032,
24 2.710	مرون وسسسا	29	27101	30	. ,	US	Florida Statutes 🛮 Yes 🗆 No
	9. Name and Address			7001		Y	10. Name and Address of New Registered Agent
<u> </u>					B1	Name	
(1)17750		0 1110			\sqcup		
	CORPORATE SERVICE			[4	B2	Street Ac	ddress (P.Ö. Box Number is Not Acceptable)
	RTHWEST 167TH STRE	•		-	20		
NORTH	MIAMI BEACH FL 3316	2		'	B3		
		•		la la	B4	City	85 Zip Code
					١,	,	FL BS 2 P COOR
11. Pursuant to	the provisions of Sections	607.0502 and 60	07.1508, Florida Statute	s, the abov	e-n	amed corp	poration submits this statement for the purpose of changing its registered office
or registere	ed agent, or both, in the Sta h, and accept the obligation	ite of Florida, Suc is of Section 607	h change was authorize 10505, Elorida Statutes	ed by the co	orpo	oration's b	board of directors. I hereby accept the appointment as registered agent, I am
	n, and accept the obligation	3 OI, GOCIIO 1 OO7	.0000, Florida Gtatutes.	•			
SIGNATURE _	Signature, typed or primed name of re-	stered egent and title if	anoicable (NO)	TE: Registered A		l signature regi	quired when reinstating) DATE
12.	· · · · · · · · · · · · · · · · · · ·	CERS AND DIRE	 	13.	9		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	X C		DELETE	1. 1 TIT	ı F		P Change [74] Addition
NAME		DLI	—	1.2 NAN		1	ROSER LINVILLE
						305 W. H# STREET, Soire 20	
STREET ADDRESS		,)			ADDRESS	
CITY-S1-ZIP	NEW YORK NY 100	22		1.4 CiTY		1 - ZIP	WINSTON - SALEM, NC 27101
TITLE	S		DELETE	2. 1 117			Change: Maddition
NAME	Ludwig, andrew			2 2 NAN	Æ		HENRY P. WOLDBURN
STREET ADDRESS	120 EAST 56TH STR	REET, STE. 835	5	2 3 STR	133	ADDRESS	2315 BEACH BLUD SUITE 102
CITY-ST-ZIP	NEW YORK NY 1002	22		2.4 OITS	r-\$1	r-zip	JACKSONVILLE BEACH FL 32250
1ITLE			□ DELETE	3. 1 7/7	LE		S ☐ Change 🔀 Addition
NAME				3.2 NAN	ΛE		MARK RINE .
STREET ADDRESS				33 STE	REFT	ADORESS	BOS W 414 STREET, SUITE 2.D
CITY - ST - ZIP				3.4 CITY			(A) and a factor of 200
TITLE			☐ DELETE	4. 1 TiTi		1- LIF	Winston SALEM, NC 27101 Change Addition
			الما الماداد				See / ATTACHED CHANGE AUDITION
NAME				4.2 NAN			LUT OF ADDITIONS
STREET ADDRESS						ADDRESS	LUT OF ADDITIONS
CITY-ST-ZIP				4.4 CITY		r-ZIP	
1ITLE :			☐ DELETE	5. 1 TiTi	LE		↑ Change ☐ Addition
NAME				5.2 NAN	ΛE		1
STREET ADDRESS				5.3 STR	EET.	ADDRESS	1
CITY-S1-ZIP				5.4 CITY	r-\$1	r-zip	1
TITLE			DELETE	6 1 TITI			Criange: Addition
NAME			•	6.2 NAN			/
STREET ADDRESS	_	/				ADDRESS	<u>'</u>
l l		/ }					-
CHY-ST-ZIP	contifu that the information	supplied with this	filing is voluntarily furni	6.4 City			ify for the exemption stated in Section 110 07(2)(b) Florida Statutos 16 whose
certify that	the information increated or	the sinnus repo	interior supplemental anni	ual report is	tru	e and acci	ify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further curate and that my signature shall have the same legal effect as if made under

certify that the information inpressed on the timust/reporter 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 of score of tipe despection of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged or on an introduction with an address.

SIGNATURE:

(910/721.4037

4-26-46 (

CH2E034 (12)