FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000075334 (9)

ADVENTURE SPORTS USA, INC.

FILED Jan 29 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				1 (00)/00) (10 10/01 (1//) 00/() 00/() 0	Thil Boile (506) Girdé (6180 bille \$10) (66)
199 N. FEDERL HIGHWAY DEERFIELD BEACH FL 33441		10 BAYVIEW AVE. LAWRENCE NY 11559 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				09/29/1995	
2. Principal f	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0651837	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Star	te	City & State	1	6. Election Campaigr Financing	\$5.00 May Be
Zip	Country	28	1 Contry	Trust Fund Contribution	Added to Fees
	Country 25	⊢ ′	30 Cantry	This corporation owes or has personal Property Tax due June	F-1
24	9. Name and Address of Co	29 urrent Registered Agent	[30]	10. Name and Address of New Re	
23	TEVEN DAPUZZO 167 N.E. 28TH STREET 3HTHOUSE POINT FL 33064		Name Street Add	dress (P.O. Box Number is Nol Accepta	ble)
	\$		04 City		FL 85 Zip Code
office or	registered agent, or both, in the l	.0502 and 607.1508, Florida State State of Florida. Such change was Digations of, Section 607.0505, F	s authorized by the corpora	poration submits this statement for the patients board of directors. It hereby accessions	nurnose of changing its registered
44				red when reinstaling)	BATE CONTROL IN TO
12.	OFFICERS	S AND DIRECTORS DELETE	1.1 (LE	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
NAME	DAPUZZO, STEVE SR	[_] bittie	1.2 AME		C Country
STREET ADDRESS	1233 BEECH ST.		1.3 JREET ADDRESS		
CITY-ST-ZIP	LAWRENCE NY		1.4 :ITY-S1-ZIP		j
TITLE		☐ DELET E	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	<u>:</u>		3.4. CITY - S1 - ZIP		
TITLE	•	L_] DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		_ week	6.2 NAME		ET Aurille ET Manifoll
STREET ADDRESS			6.3 STREET ADDRESS		
•			6.4 CRY-ST-ZIP		
14. I hereby	Legify that the information supplied	od with this filing does not qualify		Section 119.07(3)(i), Florida Statutes. I	further certify that the information
indicated on this annual report or 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 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 12 or Block 13 if changed, or on an attachment with an address.					