2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR **DOCUMENT #**

1. Entity Name

ACCESS SPORTS LIMITED, INC.



T1LED
Aug 25, 2003 8:00 am
Secretary of State
○8-25-2003 90099 036 ***150.00

4828 KLOSTERMAN OAKS BOULEVARD 4			Adling Address 4828 KLOSTERMAN OAKS BOULEVARD PALM HARBOR FL 34683				1					
2. Principal Place of Business 3			3. Mailing Address				I		IIIF Ca lii Ba iib III	 	#8} 1 } 1	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & State	9	City	City & State				. FEI N	FEI Number 59-3565919			oplied For ot Applicable	
Zip	Country Zip Co			Countr	у	5. Certificate of Status Desired S8.75 Additional Fee Required						
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent						
•					Name							
SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE					Street Address (P.O. Box Number is Not Acceptable)							
CORAL GABLES FL 33134												
									FL	Zip Cod	e	
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, typed or printed name of register	ed agent and title if app	licable. (NOTE: I	Registered A	Agent signatu	re required when	n reinstatin	ng)	DATE			
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State							9	Election Campaign Fir Trust Fund Contribution			0 May Be I to Fees	
10.		S AND DIRECTO	RS	11.			ADDITIO	ONS/CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11	
TITLE NAME	DEDARED ADVIOUS		TITLE NAME						☐ Change	☐ Addition		
STREET ADDRESS CITY-ST-ZIP	4828 KLÖSTERMAN OAKS PALM HARBOR FL 34683	BOULEVARD			ADDRESS							
TITLE NAME STREET ADDRESS			☐ Delete	TITLE	ADDRESS	•	- -	, 1991		☐ Change	☐ Addition	
CITY-ST-ZIP				CITY-S							Ì	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	TITLE NAME STREET CITY-S	ADDRESS T-ZIP					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE	ADDRESS	5.				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		☐ Delete	TITLE NAME	ADDRESS					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		-	☐ Delete	TITLE NAME STREET CITY-S	address T-ZIP					Change	☐ Addition	

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:**

727-937-0564

70140864 80140864



VIA COURIER

August 19, 2003

Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

RE: UNIFORM BUSINESS REPORT -- ACCESS SPORTS LIMITED, INC. EIN # - 59-3565919

Dear Sir/Madame:

Enclosed is check in the amount of US\$150.00 for payment of the Uniform Business Report filing fee for Access Sports Limited, Inc.

I did not receive a pre-printed prescribed form or a second notice. When I spoke with a person at the Department of State's Division of Corporations, I was informed to submit a check for US\$150.00 and a copy of the UBR form to your office.

I can be contacted at 727-937-0564 if you require a further explanation. Thank you for your attention to this matter.

Sincerely,

Arthur M Bernier

President