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FILED
Mar 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000005221 (4)

1. Corporation Name

TEAM FREEDOM PROMOTIONS, INC.

Principal Place of Business

C/O EATIN & MAROULES
200 E. BROWARD BLVD
FT LAUDERDALE FL 33301

Mailing Address

C/O EATIN & MAROULES
200 E. BROWARD BLVD
FT LAUDERDALE FL 33301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/09/1996

4. FEI Number

88-0352823

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 C/O ENTIN + MARGULES
Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

MARGULES, LEON ESQ
%ENTIN & MARGULES, PA
200 E BROWARD BLVD
FT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DCP
NAME DECUBAS, LUIS
STREET ADDRESS %ENTIN & MARGULES, 200 E BROWARD BLVD
CITY-ST-ZIP FT LAUDERDALE FL 33301

TITLE DCV
NAME MARGULES, LEON
STREET ADDRESS %ENTIN & MARGULES, 200 E BROWARD BLVD
CITY-ST-ZIP FT LAUDERDALE FL 33301

TITLE D
NAME HABER, ROGER S
STREET ADDRESS 1140 AVE OF THE AMERICAS 5TH FLR
CITY-ST-ZIP NY NY 10036

TITLE ST
NAME BAILIN, KELLI A
STREET ADDRESS 1140 AVE OF THE AMERICAS 5TH FLR
CITY-ST-ZIP NY NY 10036

TITLE D
NAME HERSHAN, ROBERT
STREET ADDRESS 11 N. POND RD.
CITY-ST-ZIP CRESSKILL NJ 07626

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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.

SIGNATURE: [Signature]

KEVIN A. [Signature]

212-768-2100

CR2E034 (10/97)