

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000017853

Entity Name: POWER PLAYER SPORTS, L.L.C.**Current Principal Place of Business:**4301 S. FLAMINGO RD.
106 - 142
DAVIE, FL 33330**Current Mailing Address:**4301 S. FLAMINGO RD.
106 - 142
DAVIE, FL 33330 US**FEI Number:** 47-4587974**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MADISON, SAMUEL A JR
4301 S. FLAMINGO RD.
106 - 142
DAVIE, FL 33330 US*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.***SIGNATURE:** SAMUEL A MADISON JR

03/25/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	AMBR
Name	BARNES, KARLOS A	Name	MADISON, SAMUEL A JR
Address	4301 S. FLAMINGO RD. 106 - 142	Address	4301 S. FLAMINGO RD. 106 - 142
City-State-Zip:	DAVIE FL 33330	City-State-Zip:	DAVIE FL 33330
Title	MGR	Title	MGR
Name	INGE, LEONARD A JR	Name	SAWYER, JACK A
Address	4301 S. FLAMINGO RD. 106 - 142	Address	4301 S. FLAMINGO RD. 106 - 142
City-State-Zip:	DAVIE FL 33330	City-State-Zip:	DAVIE FL 33330

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SAMUEL A MADISON JR

PRESIDENT

03/25/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date