2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2005 08:00 AM
Secretary of State

DOCUMENT # 177516

1. Entity Name
SWIM 'N' SPORT SHOPS INC

Principal Place of Business
2396 N W 96 AVENUE
MIAMI, FL 33172

Mailing Address
2396 N W 96 AVENUE
MIAMI, FL 33172

01032005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-0717632 — Applied For / Not Applicable

5. Certificate of Status Desired — **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MARK T. SIDLE
2396 NW 96TH AVENUE
MIAMI, FL 33172

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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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SIDLE, MARK
STREET ADDRESS	2396 NW 96 AVE
CITY-ST-ZIP	MIAMI, FL 0,
TITLE	VTD
NAME	RUHL, ROBERT
STREET ADDRESS	2396 NW 96 AVE
CITY-ST-ZIP	MIAMI, FL 0,
TITLE	SD
NAME	RUHL, MARCIA J.
STREET ADDRESS	2396 N.W. 96TH AVE.
CITY-ST-ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/07/05-80016-019 158.75

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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: ROBERT A. RUHL — 1/6/05 — 305 593 5071
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #