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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 330590

(1)

POMPANO SKATE ARENA INC

FILED Apr 16 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 1230 N.E. 39TH ST. POMPANO BEACH FL 33064 Mailing Address 1230 N.E. 39TH ST. POMPANO BEACH FL 33064-6119						3. Date Incorporated or Qualified 3a. Date of Last Report				
							3. Date Incorporated or Qualified 05/27/1968		of Last 1/1996	
2. Principal 21	l Place of Business	2a. Maili 26	ing Address			- 	4. FEI Number 59-1213449			Applied For Not Applicable
Suite, Ap	pt #, etc.		e, Apt. #, etc.	*****			5. Certificate of Status Desired		\$8.75	Additional Required
City & St 23	late	City 28	& State				Election Campaign Financing Trust Fund Contribution	₽		0 May Be d to Fees
Ζιρ 24	Country 25	Zip 29	29 30				8. This corporation has liability for integrating the state of the st			
•	g. Name and Address of Curr	ent Registered	Agent				10. Name and Address of New Reg	pistered A	gent	
	MITH,EDWIN D.				81	Name				
1230 N.E. 39TH STREET POMPANO BEACH FL 33064					82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)	·	
,	THE PERSON NAMED IN COLUMN TO SERVICE OF THE PERSON NAMED IN COLUMN TO SERVICE				83					
					B4	City		FL	85 Zi	p Code
SIGNATURE 12. TITLE	Signature, typed or printed name of registered a OFFICERS A	agent and title if applic AND DIRECTOR:		OTE: Registere 13. 1.1 TI		int signature require	of when reinstating) ADDITIONS/CHANGES TO OFFIC		DIRECTO	
NAME STREET ADURES	SMITH, EDWIN D 1230 N.E. 39TH STREET POMPANO BCH FL				TAEET	ADDRESS				
CHY-S1-ZIP	FORM AND BOTTLE				IIY. S	T-ZIP				Laddion
1111.5			DELETE			ľ			Changi	t FAUUROL
TITLE NAME			DELETE	2.1 TO	TLE				Changi	Addition
NAME STREET ADDRESS	8		DELETE	2.1 T(2.2 N	TLE AME	ADDRESS		. L	Chango	S [_] Addition
NAME	18			2.1 T(2.2 N 2.3 S	TLE AME TREET	ADDRESS ST-21P	.			
NAME STHEET ADDRESS CRY-SE-ZIP TITLE	18		☐ DELETE	2.1 T(2.2 N, 2.3 S) 2.4 C 3.1 T)	TLE AME TREET DITY-S		·		Change	
NAME STHEET ADDRESS CRY-ST-ZIP TITLE NAME				2.1 T(2.2 N, 2.3 S) 2.4 C 3.1 T(3.2 N,	TLE AME TREET DITY-S TLE AME	ST-ZIP		. [
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NAME STHEET ADDRESS COLVEST-ZIP THEE NAME STHEET ADDRESS CHY-ST-72* THEE	35		☐ DELETE	2.1 TI 2.2 N. 2.3 Si 2.4 C 3.1 TI 3.2 N. 3.3 Si 3.4 C 4.1 TI 4.2 N	THE AME TREET OTY-S THE AME TREET OTY-S THE	ST-ZIP ADDRESS			Chang	e Addition
NAME STHEET ADDRES COLY-ST-ZIP THEE NAME STHEET ADDRES CITY-ST-ZIP THEE NAME STREET ADDRES CITY-ST-ZIP	35		DELETE	2.1 Ti 2.2 N 2.3 Si 2.4 C 3.1 Ti 3.2 N 3.3 Si 3.4 C 4.1 Ti 4.2 N 4.3 Si 4.4 C	THE AME TREET OTY-S THE AME TREET LITE NAME TREET NAME	ADDRESS ST-ZIP ADDRESS ADDRESS	v.4 · ·		Chang	e Addition
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NAME STHEET ADDRES GBY-SE-ZIP UILLE NAME STHEET ADDRES GBY-SE-ZIP TUTE NAME STREET ADDRES GBY-SE-ZIP TUTE NAME NAME	38		DELETE	2.1 TI 2.2 N 2.3 Si 2.4 C 3.1 TI 3.2 N 3.3 Si 3.4 C 4.1 TI 4.2 N 4.3 Si 4.4 C 5.1 TI 5.2 N	THE AME TREET DITY-S THE AME TREET T	ADDRESS ST-ZIP ADDRESS IT-ZIP			Chang	e Addition
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port or supplymental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that mation or the exciver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name anged, or on an altischment with an address. information indicated on this Lan an officer or director of appears in Block 12 or Block