

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 617426 (2)

1. Corporation Name

J & J SALES, SPORTING GOODS, INC.

Principal Place of Business

119 MUSTANG WAY
MERRITT ISLAND FL 32953

Mailing Address

119 MUSTANG WAY
MERRITT ISLAND FL 32953



3. Date Incorporated or Qualified

04/13/1979

3a. Date of Last Report

05/01/1995

4. FEI Number

59-1911494

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 has liability for intangible tax under s. 199.032
Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

BLOCK, IRVING N
119 MUSTANG WAY
MERRITT ISLAND FL

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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 is not applicable

Signature typed or printed name of registered agent is not applicable

Date

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	BLOCK, IRVING N	
STREET ADDRESS	1520 GIRARD BLVD	
CITY- ST- ZIP	MERRITT ISLAND FL	
TITLE	VD	☐ DELETE
NAME	TAYLOR, LORI A	
STREET ADDRESS	214 COACHMANS COVE	
CITY- ST- ZIP	ALTAMONTE SPRINGS FL	
TITLE	SD	☐ DELETE
NAME	BLOCK, ANNA M	
STREET ADDRESS	1520 GIRARD BLVD	
CITY- ST- ZIP	MERRITT ISLAND FL	
TITLE	TD	☐ DELETE
NAME	BLOCK, ANNA M	
STREET ADDRESS	1520 GIRARD BLVD	
CITY- ST- ZIP	MERRITT ISLAND FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY- ST- ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY- ST- ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY- ST- ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY- ST- ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

I.N. Block

I.N. Block

Pres. elect 6/20/96

407/452-2323

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Block

CR2E034 (12/95)