

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 01 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 # **820890** (2)
1. Corporation Name
SPORTSERVICE CORPORATION

Principal Place of Business
**438 MAIN STREET
BUFFALO NEW YORK 14202**

Mailing Address
**438 MAIN STREET
BUFFALO NEW YORK 14202**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/13/1967	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 16-0848422	
22	City & State	27	City & State	Applied For <input type="checkbox"/> Not Applicable	
23	Zip	28	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24	Country	29	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

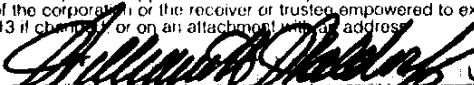
9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85		86 Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRYBUS, JANICE R.	1.2 NAME	
STREET ADDRESS	438 MAIN STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	BUFFALO NY	1.4 CITY-ST-ZIP	
TITLE	VO	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, GORDON C	2.2 NAME	VP-SPECIAL EVENTS
STREET ADDRESS	438 MAIN STREET	2.3 STREET ADDRESS	VINCENT M. CARRIERE
CITY-ST-ZIP	BUFFALO NY	2.4 CITY-ST-ZIP	438 MAIN ST.
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLER, BRYAN J.	3.2 NAME	
STREET ADDRESS	438 MAIN STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	BUFFALO NY	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACOBS, JEREMY M MR	4.2 NAME	DCEO
STREET ADDRESS	438 MAIN STREET	4.3 STREET ADDRESS	JEREMY M. JACOBS, JR.
CITY-ST-ZIP	BUFFALO NY	4.4 CITY-ST-ZIP	438 MAIN ST.
TITLE	D	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACOBS, JEREMY	5.2 NAME	DIRECTOR
STREET ADDRESS	438 MAIN STREET	5.3 STREET ADDRESS	JESSICA RAHUBA
CITY-ST-ZIP	BUFFALO NY	5.4 CITY-ST-ZIP	438 MAIN ST.
TITLE	V	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANIELS, NORMAN W.	6.2 NAME	PRESIDENT
STREET ADDRESS	438 MAIN STREET	6.3 STREET ADDRESS	NANCY J. PARKER
CITY-ST-ZIP	BUFFALO NY	6.4 CITY-ST-ZIP	438 MAIN ST.

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:  **William H. Waldorf** 4/16/98 716-858-5000

CP2E034 (10/97)