

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000001434

1. Entity Name

SPORTINGARENA.COM, INC.

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90427 018 ***150.00

Principal Place of Business

1145 CHERRY PALM LANE
HOLLYWOOD FL 33019

Mailing Address

1145 CHERRY PALM LANE
HOLLYWOOD FL 33019

2. Principal Place of Business

3050 UNIVERSAL BLVD.

3. Mailing Address

3050 UNIVERSAL BLVD.

Suite, Apt. #, etc.

SUITE 120

Suite, Apt. #, etc.

SUITE 120

City & State

WESTON, FL

City & State

WESTON, FL

Zip

33331

Country

U.S.A.

Zip

33331

Country

U.S.A.

6. Name and Address of Current Registered Agent

GARCIA, BRIAN M
ONE S.E. THIRD AVE., 28TH FLOOR
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

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

City

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CP NAWALRAI, RAVIN 1145 CHERRY PALM LANE HOLLYWOOD FL 33019	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST KEDROSKI, ARTHUR 1145 CHERRY PALM LANE HOLLYWOOD FL 33019	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KERMIS, DAVID 1145 CHERRY PALM LANE HOLLYWOOD FL 33019	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NAWALRAI, AMU 1145 CHERRY PALM LANE HOLLYWOOD FL 33019	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CPD NAWALRAI, RAVIN 3050 UNIVERSAL BLVD., SUITE 120 WESTON, FL 33331	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST KEDROSKI, ARTHUR 3050 UNIVERSAL BLVD., SUITE 120 WESTON, FL 33331	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD NAWALRAI, AMIT 3050 UNIVERSAL BLVD., SUITE 120 WESTON, FLORIDA 33331	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAVIN NAWALRAI

APRIL 24, 2001

Date

(954) 349-4270

Daytime Phone #

CR2E034 (10/00)