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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

TOTAL ATHLETE, INC.													
Principal Place of Business					Mailing Address					ļ	i jabitan sirk fålta tibli Baldt bildt tau diali ål	fit fineti dint: fift theur inn:	
% DAVID A. DUNKIN 170 W. DEARBORN ST ENGLEWOOD FL 34223					4163 S TAMIAMI TRAIL VENICE FL 34283 US						DO NOT WRITE IN THI	S SPACE	
										3.	3. Date Incorporated or Qualified		
											07/26/1982		
2. Principal Place of Business					2a. Mailing Address					4.	FEI Number	Applied For	
21	21				26						59-2213721	Not Applicable	
22					Suite, Apt. #, etc.					5.	. Certificate of Status Desired	\$8.75 Additional Fee Required	
23	City & State				City & State					8.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
24	Zip	Country Zip 25 29 30					30 30	Country		8.	. This corporation owes or has paid the or Personal Property Tax due June 30.	current year Intangible	
9. Name and Address of Current Registered Agent								Ī	10. Name and Address of New Registered Agent				
DUNKIN, DAVID A								81	Name				
170 W. DEARBORN ST ENGLEWOOD FL								82	Street A	Nodress (F	P.O. Box Number is Not Acceptable)		
arrows (VVVV IV								63					
								84	City		F	L 85 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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.													
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE													
12. OFFICERS AND DIRECTORS							13.				ADDITIONS/CHANGES TO OFFICERS AI	ND DIRECTORS IN 12	
11	TITLE PD DELETE 1						1.1	TITLE		Change Addition			
NAME YUST, FRANK A JR							1.21	1.2 NAME					
ATOTAL ADDRESS 1800 MULICOPOING DNC CIO								4.0 CTDEET 4000TOD					

STREET ADDRESS 1808 WHISPERING PNS CIR 1.3 STREET ADDRESS ENGLEWOOD, FL 00000 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2.4 CITY - ST - ZIP DELETE 3.1 TITLE Addition TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change TITLE 4.1 TITLE Addition 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change ___ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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:

Frank

9414934116

FILED

Jan 23 1998 8:00am

Secretary of State