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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	MENT # F94000 OTORS SPORTS, INC.	0005307 (3)						8		
Principal Plac	ce of Business	Mailing Address	<u> </u>			10001000 1110 10111 81011 00111 00111 00111	Barri Derbi Ərib	D THAT BOTH	100/100/	
515 POST OAK BLVD., STE. 300 HOUSTON TX 77027		9700 10TH STREET NO OT PETERODURG FL 607	10-4210							
						Date Incorporated or Qualified	3a. Date	of Last R	eport	7
į						10/12/1994	05/01/		opon	l
· ·	Place of Business	2a. Mailing Address				4. FEI Number	_1	→	oplied For	1
Suite, Apt.	# Alc	26 515 Post Suite Apt #, etc	MK	B	LUD.	74-1990536			ot Applicable	4
22	, π ₁ σισ.	SUITE 3	ma.			5. Certificate of Status Desired		7 6.70 (0 Fee Re	Additional equired	
City & Stat	te	City & State				6. Election Campaign Financing		\$5.00		1
23		28 HOUSTON, TX				Trust Fund Contribution		Added t		
Žip	Country	Z _D	Cou	intry		8. This corporation has liability for			199.032,	1
24	25 9. Name and Address of Curre	29 7702.7	30	u.	· 5 ·	Florida Statutes 10. Name and Address of New Re	Yos 🔲 I	NO ON		4
200	DOSTONE, DEBRA WEISS ESQ.	in heliatelee Alein		81	Name	io. Hame and Address of New Ne	gistered Ag			-
	K, HANZMAN, PONCE, ET AL		100		Change	Address (D.O. Do. Muscher is Mel Assessed				-
	SE 2ND ST., #2800			82	Street	Address (P.O. Box Number is Not Acceptate	0161			l
	MI FL 33131			83						7
]	•			84	City			95 Zip (Code	-
					 		 	`		
11. Pursuant office or	to the provisions of Sections 607.050 registered agent, or both, in the State	02 and 607.1508, Florida State o of Florida. Such change was	utes, thè a s authorize	hove d by	e-named / the con	corporation submits this statement for the poration's board of directors. I hereby accel	ourpose of ch of the appoin	anging it iment as	s registered registered	ł
agent la	am familiar with, and accept the oblig	gations of, Section 607.0505, F	torida \$ta	lutes	S.	•				Ì
SIGNATURE	Signature, typed or printed name of tog-stered ag	ent and tale if applicable (NC	DIF Fleaislere	a And	int signature	required when reinstating)	DATE			ļ
12.		ID DIRECTORS	13.	- 19		ADDITIONS/CHANGES 10 OFFIC		RECTOR	S IN 12	1
TITLE	D	☐ DELETE	1111	7LE				Change	Addition	
NAME	BECKER, ALLEN J		1.P N	AM!						
STREET ADDRESS	515 POST OAK BLVD., #300		1.8 S	REFT	ADDRESS					Įį.
CITY-ST-ZIP	HOUSTON TX 77027	FIREY			1-7IP			104		4
TITLE	BECKED CYDA	☐ DELETÉ	2.1 1				<u> </u>	Change	Addition	1
NAME STREET ADDRESS	BECKER, GARY 515 POST OAK BLVD., #300		2.2 N		ADDITION OF					1
CITY-ST-ZIP	HOUSTON TX 77027				ADDRESS ST-ZIP					}
TITLE	8	DELFTE	3.1 Ti		۱۱۳ - اور 			Change	Addition	-
NAME	LEWIS, JEFFRY B		3.2 N	AM(
STREET ADDRESS	515 POST OAK BLVD., #300		3.3 S	THEET	ADDRESS					1
CITY-ST-ZIP	HOUSTON TX 77027		3.4, 0	11y - 9	S1 - 7(P					
TITLE	T COMMISSION OF THE COMMISSION	DELETE	4.1 10					Change	Addition	
NAME	ZLOTNIK, ROBERT S		4.21							-
STREET ADDRESS	515 POST OAK BLVD., #300		1		ADDRESS					
CITY-ST-ZIP	HOUSTON TX 77027	▼ DELETE	4.4 C 5.1 TI		ST-ZIP	ρ	TX	Change	Addition	
NAME	WEST, WILLIAM C	pa vicini	5.1 II] '	•		E_J AUUNIUN	1
STREET ADDRESS	515 POST OAK BLDV., STE 30	00				MANCUSO, CHARLIE 515 POST OAK BLVD.,	STE.30	ND OS		1
CITY-SI-ZIP	HOUSTON TX				31-21P	HOUSTON TX 7706	17			
TITLE		DELETE	6.1 11					Change	Addition	1
NAME	1		62 N	AME		ĺ				1
STREET ADDRESS			6.3 \$	REET	ADDRESS					

6.4 (CITY-S1-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(r), 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 eath; 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 all achiment with an address.

CIONATURE.