

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

1995 MAY -1 PM 7:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000005914

1. Corporation Name

SPORTS LINK, INC.
1 EAST BROWARD BLVD #1509
FT. LAUDERDALE, FL 33301

Principal Place of Business

Mailing Address

1 EAST BROWARD BLVD. #1509
FT. LAUDERDALE, FL 33301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report

11/16/94

88-0291163

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

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Virginia Mahan

1 East Broward Blvd #1509
Ft. Lauderdale, FL 33301

81 Name

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

83

84 City

FL

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

NOTE: Registered Agent Signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
Chairman
Philip T. Siracusa
2828 Hutchinson Street
Vista, CA 92084

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
Vice-Chairman
Roderic G. Steinkamp
1828 Vaccaro Place
Henderson, NV 89014

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
President
M. Matson
2204 Club Pacific Way #103
Las Vegas, NV 89128

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
Secretary/Treasure
Phyllis Reff
4812 Maryvale, Las Vegas, NV 89130

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
Director
Terry J. Long
3133 N. Ad-Art Road
Stockton, CA 95215

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
Director
Robert M. Schulte
7946 E. San Luis Ave
Orange, CA 92669

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY ST ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY ST ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY ST ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY ST ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY ST ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY ST ZIP

500001475385
-05/04/95--01028--010
***200.00 ***200.00

TAD
5-1-95

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #