PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS FILED Apr 29, 1999 8:00 am Secretary of State 04-29-1999 90137 050 ***150.00

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1999

DOCUMENT # F95000003890 1. Corporation Name

IRWIN SPORTS, INC.

Principal Place of Business	Mailing Address								
2200 CORPORATE BLVD. NW SUITE 306 BOCA RATON FL 33431	2200 CORPORATE BLVE SUITE 306 BOCA RATON FL 33431				DO NOT WRITE IN TH		IS SPACE		
US	US				 Date Incorporated or Qualifed 08/11/1995 				
2. Principal Place of Business	2a. Mailing Address				4. FEI Number		App ied For		
21	26				98-0107197		Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Additional ee Required		
City & S ate	City & State				6. Election Campaign Financing Trust Fund Contribution		.00 May Be ided to Fees		
Zip Country 24 25	Zip	30	ountry		This corporation owes the current year Int Personal Property Tax.	angible			
9. Name and Address of Current	t Registered Agent				10. Name and Address of New Registered	Agent			
			81	Name					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			82	82 Street Address (P.O. Box Number is Not Acceptable)					
PLANTATION FL 33324			83	-					
-			84	City	FL	85	Zip Code		
11. Pursuant to the provisions of Sections 607.050	2 and 607.1508, Florida Sta of Florida, Such change was	tutes, the	above ed by	e-named corporation	oration submits this statement for the purpose of on's board of cirectors. I hereby accept the appo	changii ntment	ng its registered as reg stered		

Law familiar with and accept the obligations of Section 607 0505. Flurida Statutes

agent. : a	in familial with, and accept the obligations of, of	500001 007.0000, 1 001	ua ciatotes.			
SIGNATURE	Signature, typed or printed naine of registered agent and title if ap	plicable. (NOT E. F	Registered Agent signature require	d when reinstating)	DATE	
12.	OFFICERS AND DIRECT	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1			
TITLE	PSD	☐ DELETE	1.1 TITLE		☐ Change	Addition
NAME	IRWIN, PETER		12 NAME			
STREET ADDRESS	40 11444114 4177		1.3 STREET ADDRESS			
CITY-ST-ZIP	TORONTO ON M6K1X		14 CITY-ST-ZIP			i
TITLE	VP	☐ DELETE	2.1 TITLE		☐ Change	Addition
NAME	SAKOLSKY, CHARLES		2.2 NAME			
STREET ADDRESS	ACCO CORPORATE DUE AND		2.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33431		2. 4 CITY-ST-ZIP			
TITLE	VPT	DELETE	31 TITLE		Change	Addition
NAME	PRYDE, SUSAN	_	3.2 NAME			
STREET ADDRESS	40 4144444 4174111		3 3 STREET ADDRESS			
CITY-ST-ZIP	TORONTO, ONTARIO CANADA M6K -1X6	3	3.4. CITY-ST-ZIP			
TITLE	DC	☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME	HALE, DOUGLAS	_	4, 2 NAME			
STREET ADDRESS	ATE ATEL ALCOHOL AA		4.3 STREET ADDRESS			
	NAPLES FL 33940		4.4 CITY-ST-ZIP			
TITLE	184 020 12 00040	☐ DELETE	51 TITLE		☐ Change	Addition
NAME			5.2 NAME			
			5.3 STREET ADDRESS			
STREET ADDRESS			5.4 CITY-ST-ZIP			
TITLE		□ DELETE	6.1 TITLE		Change	Addition
		_ 5	6.2 NAME		_ ,	_
NAME			6.3 STREET ADDRESS			
STREET ADDRESS			6.4 CITY-ST-ZIP			
OUTAL OF THE	1		■ 0.4 OH 11-01-4F			

14. I herety certify that the informa ion supplied with this filing does not qualify for the exemption stated in Section 119.0; (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 it e same legal effect as if made under oath; that I am an officer or director of the corporation withe 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 an also limination with an address, with all other like empowered.

SIGNATURE:

SUSAN PRYDE

APRIL 26, 1999

EXT. 4429 (416) 583-4548