

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

FILED
May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # F9500606 4183 1. Corporation Name: SPORTS CONTROL SYSTEMS, INC.	

Principal Place of Business: 1050 S. Military Trail Apartment 102 Deerfield Beach, FL 33442	Mailing Address: 1050 S. Military Trail Apartment 102 Deerfield Beach, FL 33442
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2. Principal Place of Business:	2a. Mailing Address:
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/28/1995
4. FEI Number 05-0431710
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 owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	
ZIEGLER, STEPHEN L. BRINKLEY, MCNERNEY, MORGAN ET AL NEW RIVER CENTER, 200 E. LAS OLAS BLVD FORT LAUDERDALE, FL 33301	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
84 City	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: _____ (NEED Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS	
TITLE	NAME
	PCD
STREET ADDRESS	OXIOS, RALPH A
CITY-ST-ZIP	450 NORTH WEST 34TH STREET
	POMPANO BEACH, FL 33064
TITLE	NAME
	S
STREET ADDRESS	LA FAZIA, FRANK
CITY-ST-ZIP	3100 POST ROAD
	WARWICK, RI 02886
TITLE	NAME
	T
STREET ADDRESS	DAMIANO, LUIGI
CITY-ST-ZIP	53 ASHBURTON STREET
	PROVIDENCE, RI 02904
TITLE	NAME
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	NAME
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I hereby certify that this form does not comply 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 statement of financial 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 stockholder 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 in an attachment with an address.

SIGNATURE: X *Ralph A. Oxios* April 9, 1998
SIGNATURE AND TYPED AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)