FILED Feb 24, 1999 8:00 am

Secretary of State

02-24-1999 90041 039 ***150.00

Addition

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #	F96000003857
1 Corneration Name	1 000000001

LEGEND SPORTS INC

LEGENU SPORIS, INC.						
Principal Place of Business Mailing Address			E INDITER LITE SULLA UNIT BOST BEISE DA		Alter came came	
-914 MATANZAS AVE -914 MATANZAS AVE				•		
			DO NOT WRITE IN			
S US			DO NOT WRITE IN THIS SPACE			
			3. Date Incorporated or Qualifed			
			07/30/1996			
Principal Place of Business 2a. Mailing Address	Λ.	H	4. FEI Number	. 	plied.For	
21 9350 SOUTH DIRIG HIGHWAY 26 9350 SOUT	H VIXIÉ	/ LIGHWAY	7 64-0841345		Applicable	
22	1550		5. Certificate of Status Desired	\$8.75 A Fee Rec		
City & State City & State	. سر		6. Election Campaign Financing	~~ \$5.00 i		
23 MIAMI, FL 28 MIAMI			Trust Fund Contribution	Added to	Fees	
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		untry USA	This corporation owes the current y Personal Property Tax.	☐ Yes	₩No	
9. Name and Address of Current Registered Agent		<u> </u>	10. Name and Address of New Regis	tered Agent		
		81 Name	ARY D. LIPSON		ĺ	
GARY D. LIPSON 81 Name GAR 82 Street Addr		ddress (P.Q. Box Number is Not Acceptable)	tress (P.O. Box Number is Not Acceptable) O Soypy DIXIE HIGHWAY			
-914 MATANZAS AVE -		9	350 SUYTH DIXIE HIC	SHWAY		
SUITE 140-			41TE 1550	•		
- CORAL GABLES FL 33146		84 City	170 1030	85 Zip C	ode	
		1 7	4.AM1	FL 33	ode 156	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida office or registered agent, or pott, in the State of Florida. Such change agent. I am familiar with, and property the obligations of, Section 607.050	Statutes, the	above-named o	corporation submits this statement for the purp	ose of changing its	registered	
office or registered agent, or both in the State of Florida. Such change to agent I am familiar with approximately the obligations of Section 607,050	was autnorize 5. Florida Sta	ea by the corpo atutes.	ration's board of directors. I hereby accept the	appointment as reg	,,310,100	
1777)	GARY	n L	PSON		}	
SIGNATURE Signature, typed or pythog frame of registered agent and title if applicable.			quiled mich lenously .	ATE .		
12. OFFICERS AND DIRECTORS	13	·	ADDITIONS/CHANGES TO OFFICE		Addition	
TITLE C DELE	TE 1.1	TITLE	,	☐ Change	☐ Addition	
NAME STAPLES, JAMES T	1.2	NAME			•	
STREET ADDRESS 248 SHADY OAKS CIRCLE	1.3	STREET ADDRESS				
CITY-ST-ZIP LAKE MARY FL 32746		CITY-ST-ZIP				
TITLE STD-	TE 2.1	TITLE		☐ Change	☐ Addition	
NAME DENMEAD, LINDA	2.2	NAME				
STREET ADDRESS 1127-ODAY-CT	2.3	STREET ADDRESS	·			
CITY-ST-ZIP WINTER SPRINGS FL 32708	2.4	CITY-ST-ZIP	<u> </u>	·		
TITLE DELE	TE 3.1	TITLE		" Change	☐ Addition	
NAME SCOTT BOBBY	3.2	NAME	,		-	
STREET ADDRESS -6210-ANDERSON AVE NW	3.3	STREET ADDRESS				
CITY-ST-ZIP KNOXVILLE TN	3.4.	CITY-ST-ZIP	·			
TITLE DELE	TE 41	TITLE		Change	☐ Addition	
NAME IRWIN, JACK	4. 2	NAME	• .			
STREET ADDRESS 8301-RICHLAND COLONY	4.3	STREET ADDRESS	•			
CITY-ST-ZIP KNOXVILLE TN	4.4	CITY-ST-ZIP	. <u> </u>			
TITLE R DELE		TITLE			☐ Addition	
NAME LIPSON, GARY D.	5.2	NAME		<i>،</i>		
STREET ADDRESS - 914 MATANZAS AVE -	5.3	STREET ADDRESS	9350 South DixiE HIGH	WAY, Duit	E 1550	
CITY-ST-ZIP CORAL GABLES FL 33146	5.4	CITY-ST-ZIP	9350 SOUTH DIXIE HIGH	3156		
· · · · · · · · · · · · · · · · · · ·					T A Juliation	

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 eceiver 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 or an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

☐ DELETE