

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90024 038 ***150.00

DOCUMENT # F98000003309

1. Entity Name
TRIUMPH SPORTS, INC.

Principal Place of Business
2401 PGA BOULEVARD, SUITE 190
PALM BEACH GARDENS FL 33410

Mailing Address
2401 PGA BOULEVARD, SUITE 190
PALM BEACH GARDENS FL 33410

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0841174**

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEXIS DOCUMENT SERVICES, INC.
3953 W.W. KELLEY ROAD
TALLAHASSEE FL 32311

Name **Barry Hollander**
 Street Address (P.O. Box Number is Not Acceptable)
2401 PGA Blvd, Suite 190
 City **Palm Beach Gardens FL** Zip Code **33410**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE 
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/1/02
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PC** ☐ Delete
 NAME **FONG, HENRY**
 STREET ADDRESS **2401 PGA BOULEVARD, SUITE 280F 190**
 CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **ST** ☐ Delete
 NAME **HOLLANDER, BARRY**
 STREET ADDRESS **1221-B SOUTH BATESVILLE ROAD**
 CITY-ST-ZIP **GREER SC 29650**

TITLE ☒ Change ☐ Addition
 NAME **Secretary Hollander, Barry**
 STREET ADDRESS **2401 PGA Blvd, Suite 190**
 CITY-ST-ZIP **Palm Beach Gardens, FL 33410**

TITLE **AS** ☐ Delete
 NAME **LEBARON, C. F JR**
 STREET ADDRESS **150 N. MICHIGAN AVENUE, SUITE 2500**
 CITY-ST-ZIP **CHICAGO IL 60601**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **SIGNATURE REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/02 **(561) 624-0885**
 Date Daytime Phone #

CR2E034 (9/01)