

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # H46045 (1)

1. Corporation Name

ALL-PRO SPORTS MANAGEMENT, INC.

Principal Place of Business

1388 N.W. 2ND ST., SUITE 1  
P.O. BOX 1979  
BOCA RATON FL 33432

Mailing Address

1388 N.W. 2ND ST., SUITE 1  
P.O. BOX 1979  
BOCA RATON FL 33432



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

O'GRADY, THOMAS  
1388 NW 2ND AVENUE, SUITE 1  
BOCA RATON FL 33432

3. Date Incorporated or Qualified

03/08/1985

3a. Date of Last Report

07/06/1995

4. FEI Number

65-0029147

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

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 the corporation

(If Not Registered)

Agent Signature Required When Not Submitting

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DP  
O'GRADY, THOMAS  
1388 N.W. 2ND ST  
BOCA RATON FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

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