

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

FILED

Mar 19 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J13193 (4)  
1. Corporation Name  
AMERICAN TWISTERS GYMNASTICS ACADEMY, INC.



Principal Place of Business 2301 N.W. 33RD COURT SUITE #110 POMPANO BEACH FL 33069	Mailing Address 2301 N.W. 33RD COURT SUITE #110 POMPANO BEACH FL 33069
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2100 NW 33 ST Suite, Apt. #, etc. 22 City & State Pompano Beach FL 23 Zip 33069 24 Country USA		2a. Mailing Address 26 2100 NW 33 ST Suite, Apt. #, etc. 27 City & State Pompano Beach FL 28 Zip 33069 29 Country USA		3. Date Incorporated or Qualified 05/07/1986 4. FEI Number 59-2684089 Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent RAND, TIMOTHY C. 5950 NW 66 WAY PARKLAND FL 33067				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	
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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 Timothy C. Rand DATE 3-11-98  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PV	NAME	RAND, TIMOTHY C.	1.1 TITLE		1.2 NAME	
STREET ADDRESS	5950 NW 66 WAY		PARKLAND FL	1.3 STREET ADDRESS		1.4 CITY-ST-ZIP	
CITY-ST-ZIP				2.1 TITLE		2.2 NAME	
TITLE	V	NAME	RAND, TONI	2.3 STREET ADDRESS		2.4 CITY-ST-ZIP	
STREET ADDRESS	5950 NW 66 WAY		PARKLAND FL	3.1 TITLE		3.2 NAME	
CITY-ST-ZIP				3.3 STREET ADDRESS		3.4 CITY-ST-ZIP	
TITLE		NAME		4.1 TITLE		4.2 NAME	
STREET ADDRESS				4.3 STREET ADDRESS		4.4 CITY-ST-ZIP	
CITY-ST-ZIP				5.1 TITLE		5.2 NAME	
TITLE		NAME		5.3 STREET ADDRESS		5.4 CITY-ST-ZIP	
STREET ADDRESS				6.1 TITLE		6.2 NAME	
CITY-ST-ZIP				6.3 STREET ADDRESS		6.4 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 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 on an attachment with an address.

SIGNATURE: Timothy C. Rand DATE: 3-11-98 954-972-4987

CR2E034 (10/97)