FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **J52016** **(9)**

1. Corporation Name

SPORT CORP OF MIAMI

Principal Place of Business

% DELFINA MENDEZ GARCIA
~~734~~ W. FLAGLER ST
MIAMI FL 33130

Mailing Address

% DELFINA MENDEZ GARCIA
~~734~~ W. FLAGLER ST
MIAMI FL 33130

3. Date Incorporated or Qualified: **01/13/1987**

3a. Date of Last Report: **04/18/1995**

4. FEI Number: **59-2751310** [ ] Applied For [ ] Not Applicable

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 has total for intangible tax under s. 199.032, Florida Statutes [X] Yes [ ] No

2. Principal Place of Business

21 900 - W. FLAGLER St
22 Suite, Apt. #, etc. #13
23 City & State Miami, Fl.
24 Zip 33130 25 Country

2a. Mailing Address

26 900 - W. FLAGLER St
27 Suite, Apt. #, etc. #13
28 City & State Miami, Fl.
29 Zip 33130 30 Country

9. Name and Address of Current Registered Agent

MENDEZ GARCIA, DELFINA
734 W. FLAGLER ST
MIAMI FL 33130

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 607.1608, 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

12. OFFICERS AND DIRECTORS

TITLE	D [ ] DELETE
NAME	MENDEZ GARCIA, DELFINA
STREET ADDRESS	~~734~~ W. FLAGLER ST 900 - 13
CITY-ST-ZIP	MIAMI FL
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	[ ] Change [ ] Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	[ ] Change [ ] Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	[ ] Change [ ] Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	[ ] Change [ ] Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	[ ] Change [ ] Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	[ ] Change [ ] Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied on this filing is complete, accurate and does not qualify for the exemptions stated in Section 119.07(3)(k), 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 other entity subject to filing requirements of Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or added in Block 13 with an address.

SIGNATURE: X

SIGNATURE & TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELFINA MENDEZ GARCIA, Pres. 3/30/96

CR2E034 (12/95)