PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L24751

| 1. Corporation WINNER | S CIRCLE BASKET CASE, | INC. | | | | |
|---|---|-----------------------------|--------------|-----------|-------------------|--|
| Principal Place | e of Business | Mailing Address | | | | E 100 HOUS BIR HOUL BINK) 100 BS BIRBT HIBI BIRIT BIRST BIRIT BIRIT BIRIT BIRIT BIRIT BIRIT BIRIT BIRIT BIRIT |
| 3341 N.E. 32ND STREET 3341 N.E. 32ND STREET FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308 | | | | 3 | | DO NOT WRITE IN THIS SPACE |
| | | | | | | 3. Date Incorporated or Qualifed 10/24/1989 |
| 2. Principal Pl | lace of Business | 2a. Mailing Address | | | | 4. FEI Number Applied For |
| 21 | | 26 | | | | 65-0152169 Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | — | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required |
| City & State | 9 | City & State | City & State | | | 6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees |
| Zip | Country | Zip Cou | | ntry | | 8. This corporation owes the current year Intangible Personal Property Tax. Yes |
| 24 | 25 9. Name and Address of Currer | 29 | [30] | | | 10. Name and Address of New Registered Agent |
| | 9. Name and Address of Curren | it registered Agent | | 81 | Name | 10, |
| WEISMAN, DAVID | | | | 82 | Street Ad | ddress (P.O. Box Number is Not Acceptable) |
| 2021 TYLER ST. | | | | | | |
| SUITE 5400 HOLLYWOOD FL 33020 | | | | 83 | | |
| | | | | 84 City | | FL 85 Zip Code |
| office or r | to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga | of Florida, Such change was | authorized | יעם נ | the corpora | orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered |
| SIGNATURE | | | | | 4 -! | oviral when reinstalling) DATE |
| | | | | Agen | it signature requ | nuired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| 12. | OFFICERS AND DIRECTORS 13 | | TLE | | Change Addition | |
| NAME | P Weinrauch, Jeffrey S. | RALICH JEFEREY S | | AME | | |
| STREET ADDRESS | AND AND AND ATOMET | | 1,3 S | REET | ADDRESS | |
| CITY-ST-ZIP | 1 | | 1.4 C | TY-S | T-ZIP | |
| TITLE | | ☐ DELETE | 2.1 TI | TLE | | ☐ Change ☐ Addition |
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| TITLE | | | 3.1 TI | 3.1 TITLE | | ☐ Change ☐ Addition |
| NAME | , | | 3.2 N | AME | | |
| STREET ADDRESS | | | 3.3 \$ | TREE | TADDRESS | |
| CITY-ST-ZIP | | | 3.4. 0 | πy-s | iT-ZIP | |
| TITLE | | ☐ DELETE | 4.1 17 | | | ☐ Change ☐ Addition |
| l | I | | 4 2 1 | ANAE | 1 | |

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, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

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CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

Change

Change

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Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90007 048 ***150.00