FILE	NOW: FILING FEE AF	TER MAY 1ST IS	\$550.00		
COF ANNU	RROFIT RRORATION JAL REPORT 1999	FLORIDA DEPART	MENT OF STATE Herric of State	FILED	
DOCUMENT # M23801 1. Corporation Name				99 AUG 12 AH 9	18
Champs Sporting Goods of Esplanade, Inc.				SALE FLOR	ME SUA
Principal Place of Business 233 Broadway New York, NY 10279		Mailing Address 233 Broad New York, Attn; M.	-		W
2. Principal P	lace of Business	2a. Mailing Address		11/19/85 4. FEI Number	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		59-2570188	Not Applicable \$8.75 Additional
City & State	e	City & State		Certificate of Status Desired Election Campaign Financing Trust Find Contribution	Fee Required \$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution 8. This corporation owes the current year leading to the current year.	
24	25 9. Name and Address of Current I	29 3 Registered Agent	81 Name	Personal Property Tax. 10. Name and Address of New Registered	∐ Yes ∐ No d Agent
1200 S	rporation Systems . Pine Island Road tion, FL 33324	đ	82 Street Add 83 84 City	dress (P.O. Box Number is Not Acceptable)	85 Zip Code
				rporation submits this statement for the purpose of	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby 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 a	nd title if applicable (NOTE: Re	Jesista	Mt-Secretary DATE	27.27
12.	OFFICERS AND	DIRECTORS DELETE	43	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
NAME	D Dolo Wilmont	ריו מברבוב	1.1 TITLE 1.2 NAME		Elicinge Elixodition
STREET ADDRESS	Dale Hilpert 233 Broadway		1.3 STREET ADDRESS		
CITY-ST-ZIP	New_York, NY 10	279	1.4 CITY-ST-ZIP		
TITLE	P/D Rick Mina	☐ DELETE	2.1 TITLE		Change Addition
NAME	233 Broadway		2.2 NAME	500002395	01006008
STREET ADDRESS	New York, NY 10	279	2.3 STREET ADDRESS	***1200.0	00 ***1200.00
CITY-ST-ZIP	11 / m / D	☐ DELETE	2.4 CITY-ST-ZIP		: Change Addition
NAME	V/T/D John Cannon	LI DECETE	3.1 TITLE 3.2 NAME		L; Change L] Addition
STREET ADDRESS	233 Broadway		3 3 STREET ADDRESS		
CITY-ST-ZIP	New York, NY 10	279	3.4. CITY-ST-ZIP		
TITLE	S	☐ DELETE	4.1 TITLE	<u> </u>	☐ Change ☐ Addition
NAME	Sheilagh Clarke	;	4. 2 NAME		
STREET ADDRESS	233 Broadway		4.3 STREET ADDRESS		
CITY-ST-ZIP	New York, NY 10	279	4.4 CITY-ST-ZIP		FlChange FlAdes
TITLE	·	DELETE	5.1 TITLE 5.2 NAME		Change Addition
NAME STDEET ADODESS			53 STREET ADDRESS		
STREET ADDRESS			54 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	61 TITLE		Change [] Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		KE

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.

6.4 CITY-ST-ZIP

SIGNATURE: JULIAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary