

2000 UNIFORM BUSINESS REPORT (UBR)

5/1

DOCUMENT # M31956

1. Entity Name

SPORT PRODUCTS, INC. OF FORT LAUDERDALE

R

FILED
Jun 19, 2000 8:00 am
Secretary of State

05-15-2000 90313 050 ***150.00

Principal Place of Business

1090 W SUNRISE BLVD
FT LAUDERDALE FL 33311
US

Mailing Address

1090 W SUNRISE BLVD
FT LAUDERDALE FL 33311-7100
US

2. Principal Place of Business

3. Mailing Address

215 Fifth Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 108

City & State

City & State

West Palm Beach, Fla

Zip

Country

33401-4026

Country

USA

4. FEI Number

59-2763178

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAMER, JOHN
11995 SW 222 ST
MIAMI FL 33170

Name

Giordano, John N.

Street Address (P.O. Box Number is Not Acceptable)

220 South Franklin Street

City

Tampa

FL

Zip Code

33602

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

6/2/00

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME
S
HAMER, DAVID
STREET ADDRESS
1090 W SUNRISE BLVD
CITY-ST-ZIP
FT LAUDERDALE FL 33311 ☒ Delete

TITLE NAME
VP
Heaton, Lee W.
STREET ADDRESS
215 Fifth St. #108
CITY-ST-ZIP
WPB, Fla. 33401 ☐ Change ☒ Addition

TITLE NAME
P
SANDER, WILLIAM
STREET ADDRESS
1090 W SUNRISE BLVD
CITY-ST-ZIP
FT LAUDERDALE FL 33311 ☒ Delete

TITLE NAME
P, S
Heaton, Linn D.
STREET ADDRESS
215 Fifth St. #108
CITY-ST-ZIP
WPB, Fla. 33401 ☐ Change ☒ Addition

TITLE NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE NAME

STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John N. Giordano

Secretary/Clerk

4-200

561-832-1039

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2004 (9/99)