File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. SECRETARY OF STATE DIVISION OF CORPORATIONS LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS 98 MAR -6 AM 9: 49 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 188.75 Name and Malling Address of Limited Liability Company **DOCUMENT # M97000000188** Place of Business Address SPORTOLOGY HOLDINGS LLC C/O HERBERT L. ROUGH C/O HERBERT L. ROUGH 16353 FERN DRIVE 16353 FERN DRIVE FT. LAUDERDALE FL 33326 FT. LAUDERDALE FL 33326 3. Date Organized or Qualified | 3a. State of Formation 2. Principal Place of Business 2a. Mailing Address 04/15/1997 DE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For 65-0752359 City & State City & State Not Applicable 5. Date of Last Report 8. Certificate of Status Desired Zip Country Zip Country s8-75 Additional Fee Heguired 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name NATIONAL CORPORATE RESEARCH, LTD. INC Street Address (P.O. Box Number is Not Acceptable) 1406 HAYS STREET, SUITE 2 TALLAHASSEE FL 32301 Sulte, Apt. #, etc. ****188.75 ****188.75 Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE_ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM ROUGH, HERBERT L 16353 FERN DRIVE FT. LAUDERDALE FL 11. Ido 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 is true and excitate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver of the powered to exempt this contains as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

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SIGNATURE: