

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N99000007048

1. Corporation Name

INTERNATIONAL RHYTHMIC GYMNASTICS, INC.

Principal Place of Business

Mailing Address

1710 Canterbury Street
Jacksonville, Florida 32205-9304

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		August 12, 1992	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-3130795	
City & State		City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Country		Trust Fund Contribution	
24		29			

9. Name and Address of Current Registered Agent

Efrossina Anguelova
1710 Canterbury Street
Jacksonville, Florida 32205-9304

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: Efrossina Anguelova EFROSSINA ANGUELOVA 12-8-99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President, Secretary, Treasury, Director	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Efrossina Anguelova	1.2 NAME	
STREET ADDRESS	1710 Canterbury Street	1.3 STREET ADDRESS	
CITY-ST-ZIP	Jacksonville, Florida 32205-9304	1.4 CITY-ST-ZIP	
TITLE	Director	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Joe Manchac	2.2 NAME	
STREET ADDRESS	1710 Canterbury Street	2.3 STREET ADDRESS	
CITY-ST-ZIP	Jacksonville, Florida 32205-9304	2.4 CITY-ST-ZIP	
TITLE	Director	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Stella Angelova	3.2 NAME	
STREET ADDRESS	1710 Canterbury Street	3.3 STREET ADDRESS	
CITY-ST-ZIP	Jacksonville, Florida 32205-9304	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 617, 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.

SIGNATURE: Efrossina Anguelova EFROSSINA ANGUELOVA 12-8-99
Signature, typed or printed name of signing officer or director Date Daytime Phone #

B. REGISTER DEC 10 1999

CR2E037 (1/1/98)