03 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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02 MAR -7 AM 8:14
01-27-2003 90153 030 ***150.00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000023205

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1. Entity Name
GRAND SLAM SPORTS MARKETING INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
20533 BISCAYNE BLVD	SAME AS #2
Suite, Apt. #, etc.: 4163	Suite, Apt. #, etc.:
City & State: AVENTURA FL	City & State:
Zip: 33180 Country: USA	Zip: Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-1081861 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: ~~[illegible]~~ JERRY LEADER

Street Address (P.O. Box Number is Not Acceptable): 20533 BISCAYNE BLVD 4163

City: ~~NO MIAMI BEACH~~ AVENTURA FL Zip Code: ~~33162~~ 33180

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Jerry Leader JERRY LEADER Sec. TREAS 1-23-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRES.
NAME	FRED STOLLE
STREET ADDRESS	20533 BISCAYNE BLVD #4163
CITY-ST-ZIP	AVENTURA FL 33180
TITLE	COO
NAME	OWEN DAVIDSON
STREET ADDRESS	20533 BISCAYNE BLVD #4163
CITY-ST-ZIP	AVENTURA FL 33180
TITLE	SEC. TREAS
NAME	JERRY LEADER
STREET ADDRESS	20533 BISCAYNE BLVD #4163
CITY-ST-ZIP	AVENTURA FL 33180
TITLE	
NAME	
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12. 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 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Jerry Leader JERRY LEADER 1-23-03 305-931-9250
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #