## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P01000034019**

1. Entity Name

TOTAL ENTERTAINMENT & ATHLETE MANAGEMENT, INC.



Principal Place of Business

3700 COCONUT CREEK PKWY STE 120 COCONUT CREEK, FL 33066

Mailing Address

3700 COCONUT CREEK PKWY STE 120 COCONUT CREEK, FL 33066

## FILED May 02, 2005 08:00 AM Secretary of State



CR2E034 (10/03)

Fee Required

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<del>-</del>		
4. FEI Number	Applied For	_
65-11049 <u>25</u>	Not Applicabl	e
S. Carrillanta of Status Dunier d	\$8.75 Additional	

Certificate of Status Desired
 Name and Address of Current Registered Agent

ROSENBERG, GLENN 3700 COCONUT CREEK PKWY POMPANO BEACH, FL 33066

## DO NOT WRITE IN THIS SPACE

No Chg-P

04292005

				***	THIO OF ACE
	named entity submits this statement for the p ions of registered agent.	urpose of changing its registered	office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Registered A	gent signatur	e required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	9. Election Campaign Financia Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROSENBERG, GLENN 3700 COCONUT CREEK PKWY COCONUT CREEK, FL 33066				U00000357343 05/04/05-80070-012 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					13.1.1.35 033,0 012 100.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>-</sup>	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS GITY-ST-ZIP	anife. Ah a A ha Informacian a complication in the Alice of the				

12. I nereby 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 🚅

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/05 95

954-914-07

Daytime Phone #