

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90092 021 ***150.00

DOCUMENT # P01000078584

1. Entity Name
ADVANCED SPORTS TECHNOLOGIES, INC.



Principal Place of Business
**3360 NE 53 CIRCLE
BOCA RATON FL 33796**

Mailing Address
**3360 NE 53 CIRCLE
BOCA RATON FL 33796**



2. Principal Place of Business

3. Mailing Address

9700 Via Emilie

Suite, Apt. #, etc.

City & State

Boca Raton, FL

Zip

33428

Country

USA

Zip

33428

Country

USA

4. FEI Number **65-1139235**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**DODRILL, JAMES G II
3360 NE 53 CIRCLE
BOCA RATON FL 33796**

7. Name and Address of New Registered Agent

Name **Olshansky, Curtis**
Street Address (P.O. Box Number is Not Acceptable)
9700 Via Emilie
City **Boca Raton** FL Zip Code **33428**

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:

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

Curtis Olshansky

(NOTE: Registered Agent signature required when reinstating)

3/13/03

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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	PTSD	☐ Delete
NAME	DODRILL, JAMES G II	
STREET ADDRESS	3360 NW 53RD CIR	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PTSD	☒ Change ☐ Addition
NAME	Olshansky, Curtis	
STREET ADDRESS	9700 Via Emilie	
CITY-ST-ZIP	Boca Raton, FL 33428	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

SIGNATURE:

Curtis Olshansky
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/03

561-477-1567

Date

Daytime Phone #

CR2E034 (10/02)