2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000102681

Entity Name: SPORTERS STAMPS AND COLLECTIBLES, INC.

FILED Apr 22, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1257 ALTON ROAD MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

1257 ALTON ROAD MIAMI BEACH, FL 33139

FEI Number: 01-0674461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SOSSONKO, YOSEF

1207 LENOX AVE

MIAMI BEACH, FL 33139 US

KORF, ZALMAN
1257 ALTON ROAD
MIAMI BEACH, FL 33139 US

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.

SIGNATURE: ZALMAN KORF 04/22/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition KORF, ZALMAN KORF, ZALMAN Name: Name: 1257 ALTON ROAD 1257 ALTON ROAD Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

Title: VD () Delete Title: VS (X) Change () Addition
Name: CLAPMAN MEYER Name: KORE ZALMAN

 Name:
 CLAPMAN, MEYER
 Name:
 KORF, ZALMAN

 Address:
 1257 ALTON ROAD
 Address:
 1257 ALTON ROAD

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

Title: SD (X) Delete Title: () Change () Addition

 Name:
 KORF, MENACHEM
 Name:

 Address:
 1257 ALTON ROAD
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:

Title: TD (X) Delete Title: () Change () Addition

 Name:
 SOSSONKO, YOSEF
 Name:

 Address:
 1257 ALTON ROAD
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ZALMAN KORF PT 04/22/2003