


**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

05-01-2003 90766 002 \*\*\*150.00

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

DOCUMENT # P01000113197  
 1. Entity Name  
 M2 SPORTS COMMUNICATIONS, INC.



90117849

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
 1101 SANDPIPER LANE  
 Suite, Apt. #, etc.

3. Mailing Address  
 1101 SANDPIPER LANE  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
 ATLANTIC BEACH, FL

City & State  
 ATLANTIC BEACH, FL

Zip  
 32233

Country  
 USA

4. FEI Number  
 59-3759389

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  
 MARK MITCHELL

Street Address (P.O. Box Number is Not Acceptable)  
 1101 SANDPIPER LANE

City ATLANTIC BEACH FL Zip Code 32233

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 \_\_\_\_\_ (NOTE: Registered Agent signature is required when re-registering) 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 NAME STREET ADDRESS CITY-ST-ZIP	DPST MARK MITCHELL 1101 SANDPIPER LANE ATLANTIC BEACH, FL 32233	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 officers, directors, and employees.

SIGNATURE:  MARK MITCHELL  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)