2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 15, 2005 8:00 am Secretary of State

DOCUMENT # P02000114081 1. Entity Name ANYSPORT, INC.								04-15-2005	90075 02	1 ***15	50.00
Principal Place of Business 3435 PINE RIDGE ROAD SUITE 101 NAPLES, FL 34109				iling Address 135 PINE RIDGE ROAI JITE 101 APLES, FL 34109				I (1 18)		1854 11 1881	
2. Principal Place of Business				3. Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.			01032005	Chg-P	CR2E034	(10/03)	
City & State				City & State		4. FEI Numb 55-080				plied For t Applicable	
Zip	Country			lip	try	5. Certificate of Status Desired \$8.75 Additional Fee Required					
· · · · ·	6. Name	and Address of Current	Regist	ered Agent Name			7. Name and Address of New Registered Agent				
WATTS, STEPHEN J CEO 3435 PINE RIDGE ROAD						Street Address (P.O. Box Number is Not Acceptable)					
SUITE 101 NAPLES, FL 34109				•							
						City			FL	Zip Code	•
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. (NOTE: Registered Agent signature required when reinstating) DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.							.00 May Be ded to Fees				
10.		OFFICERS AND	DIREC	TORS		ADDITIONS	CHANGES TO OFF	ICERS AND C	IRECTORS	S IN 11	
TITLE	CEO			☐ Delete					Псналде	☐ Addition	
NAME	WATTS, STEPHEN J				E					·	
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12. I hereby	certify that th	e information supplied wi	th this fi	ling does not qualify fo	r the exe	mption stated in S	ection 119.07(3)	(i), Florida Statutes.	I further certify	y that the ir	nformation
indicated of the cor changed,	on this repo poration or t , or on an att	rt or supplemental report he receiver or trustee er achment with an address	overer with it	and accurate and that r I to execute this report I other like empowered	ny signa as requi	ture shall have the red by Chapter 60	ı same legal effe 07, Florida Statut	ct as it made under o es; and that my name	ath; that I arr e appears in f	an officer Block 10 or	or director Block 11 if