2003

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 90291 012 ***150.00

DOCUMENT # P02000122048

1. Entity Name

S.J.S. SPORTS, INC.

90125989

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
11511 VILLA GRAND	11511 VILLA GRAND
Suite, Apt. #, etc. 523	Suite, Apt. #, etc. 523
City & State Ft. MYERS, FLA.	City & State Ft. MYERS, FLA.
Zip 33913 Country USA	Zip 33913 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 74-3069047 ☐ 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 SALVATORE J. SALERNO

Street Address (P.O. Box Number is Not Acceptable) 11511 VILLA GRAND APT. # 523

City Ft. MYERS FL Zip Code 33913

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 Salvatore J. Salerno 4/28/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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	PRESIDENT
NAME	SALVATORE J. SALERNO
STREET ADDRESS	11511 VILLA GRAND #523
CITY-ST-ZIP	FT. MYERS, FLA. 33913
TITLE	
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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/02)

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 like empowered.

SIGNATURE: Salvatore J. Salerno 4/28/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #