## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000141014

LEE, JUN B

12315 GLENFIELD AVE.

TAMPA, FL 33626

Name:

Address:

City-St-Zip:

Entity Name: FAMILY SPORTS PUB INCORPORA

FILED Mar 07, 2004 Secretary of State

Entity Na	me: FAMILY	SPORTS PUB INCORPORA	ATED				
Current P	rincipal Plac	e of Business:	New Pri	New Principal Place of Business:			
12315 GLE TAMPA, F	ENFIELD AVE L 33626			1944 BRUCE B. DOWNS BLVD TAMPA, FL 33647			
Current M	lailing Addre	ss:	New Ma	New Mailing Address:			
12315 GLE TAMPA, F	ENFIELD AVE L 33626			10413 RIVERBURN DR TAMPA, FL 33647			
FEI Number	: 80-0091793	FEI Number Applied For()	FEI Number Not Ap	oplicable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
44 W. FLA SUITE 675	OM NEVADA AGLER ST. 5 33130 US	INC					
	e named entity e of Florida.	submits this statement for th	e purpose of changin	g its registe	red office or registered agent, or bot	th,	
SIGNATU	RE:						
	Electro	nic Signature of Registered	Agent		Date	_	
Election Ca	mpaign Financir	g Trust Fund Contribution ( ).					
OFFICER	S AND DIREC	TORS:	ADDITIO	NS/CHAN	GES TO OFFICERS AND DIRECT	ORS:	
Title: Name: Address: City-St-Zip:	PIMPERL, DAI 1423 HIGHWO		Title: Name: Address: City-St-Zip	:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	T ( PIMPERL, VIC 12315 GLENF TAMPA, FL 33	ELD AVE.	Title: Name: Address: City-St-Zip		(X) Change ( ) Addition , VIOLET HWOOD PLACE CHAPEL, FL 33543		
Title: Name: Address: City-St-Zip:	LEE, TERESA 1423 HIGHWO	) Delete OD PLACE PEL, FL 33543	Title: Name: Address: City-St-Zip	:	() Change () Addition		
Title:	D (	) Delete	Title:	D	(X) Change ( ) Addition		

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.

Name:

Address:

City-St-Zip:

LEE, JUN B

10413 RIVERBURN DR

TAMPA, FL 33647

SIGNATURE: JUN LEE D 03/07/2004