FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2005 8:00 am
Secretary of State
05-03-2005 90132 034 ***150.00

DOCUMENT # P04000084364

1. Entity Name
Rosenau Sports, Inc.

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE 14015967

2. Principal Place of Business	3. Mailing Address
4000 Crossroads PL	4000 Crossroads PL
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Casselberry FL	City & State: Casselberry FL
Zip: 32707 Country: USA	Zip: 32707 Country: USA

4. FEI Number: 20-1208931 ☐ 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: Jonathan S. Rosenau

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

4000 Crossroads Pl

City: Casselberry FL Zip Code: 32707

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.

SIGNATURE: [signature] Jonathan S. Rosenau 26APR05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee Is $150.00
After May 1, Fee Is $550.00
Amended UBR Is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	President	TITLE	
NAME	Rosenau, Jonathan S.	NAME	
STREET ADDRESS	4000 Crossroads Pl.	STREET ADDRESS	
CITY-ST-ZIP	Casselberry FL 32707	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Jonathan S. Rosenau 26APR05 321-229-0449
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #