

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 10, 2007 8:00 am**  
**Secretary of State**

05-10-2007 90023 041 \*\*\*150.00

<b>DOCUMENT # P04000120919</b> 1. Entity Name <b>FOOTBALL &amp; INTERNATIONAL MEDIA CORPORATION</b>			
Principal Place of Business <b>185 SE 14TH TERR SUITE 802 MIAMI, FL 33131</b>		Mailing Address <b>185 SE 14TH TERR SUITE 802 MIAMI, FL 33131</b>	
2. Principal Place of Business - No P.O. Box # <b>5255 COLLINS AVE</b>		3. Mailing Address <b>SAME</b>	
Suite, Apt. #, etc. <b>8G</b>		Suite, Apt. #, etc. <b>"</b>	
City & State <b>MIAMI BEACH, FL</b>		City & State <b>"</b>	
Zip <b>33140-2580</b>		Country <b>USA</b>	
4. FEI Number <b>84-1654605</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>MORGAN, GEORGE O JR 185 SE 14TH TERR SUITE 802 MIAMI FL 33131</b>		7. Name and Address of New Registered Agent Name <b>GARY J ARZT</b> Street Address (P.O. Box Number is Not Acceptable) <b>5255 COLLINS AVE. #8G</b> City <b>MIAMI BEACH</b> FL <b>33140-2580</b>	
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: <b>GARY J. ARZT SRVP</b> <span style="float: right;"><b>4 MAY 07</b></span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<del>RD</del> <del>MORGAN, GEORGE O JR</del> <del>2121 SW 3RD AVE 2ND FLOOR, STE. 200</del> <del>MIAMI, FL 33129</del>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<del>VAS</del> <del>ARZT, GARY J</del> <b>SEE ABOVE</b> <del>2121 SW 3RD AVE 2ND FLOOR, STE. 200</del> <del>MIAMI, FL 33129</del>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<del>GEORGE O. MORGAN JR</del> <del>3180 CORAL WAY</del> <del>MIAMI FL 33145</del>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <b>GARY J. ARZT</b>		<b>4 MAY 07</b> <b>561.212.504</b> <small>Date Daytime Phone #</small>	

ATTACHMENT

40110060

# P04000120919



**FOOTBALL & INTERNATIONAL MEDIA CORPORATION**

5255 Collins Avenue, Suite 8G, Miami Beach, FL 33140-25680

**TELEPHONE:** 561.212.5104 **FACSIMILE:** 786.348.0276 **E-MAIL:** [info@fimcofootball.com](mailto:info@fimcofootball.com)

7 May 2007

State of Florida  
Division of Corporations  
P. O. Box 1500  
Tallahassee, FL 32302-1500

Gentlemen:

Enclosed please find our 2007 Annual Report.

**This report is being filed late because we never received the appropriate (post card) Notice.**

This, in spite of the fact that we previously advised the Division of our Change of Address; as well as filing a Change of Address form with the United States Post Office. Unfortunately, that was more than six (6) months ago, and six (6) months is the term of Change of Address service provided.

Under the circumstances, we do not feel we should be penalized for the delay.

Sincerely,

A handwritten signature in black ink, appearing to read 'Gary J. Arzt', with a stylized flourish at the end.

Gary J. Arzt  
Senior Vice President

Enc. (2)