2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P10817

1. Entity Name
OUTDOOR SPORTS HEADQUARTERS, INC.

Principal Place of Business	Mailing Address
611 NW 162 AVE	967 WATERTOWER LN
PEMBROKE PINES, FL 33028 US	DAYTON, OH 45449-2463 US

DO NOT WRITE IN THIS SPACE

07312007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
31-1465209	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

YOUNG, RUSS
611 NW 162 AVE
PEMBROKE PINES, FL 33028

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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 **Due by September 14, 2007**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10.   OFFICERS AND DIRECTORS

TITLE	C
NAME	ZIOMEK, BERNARD
STREET ADDRESS	MAIN STREET PO BOX 121
CITY-ST-ZIP	FOREST CITY, PA 18421
TITLE	P
NAME	KUPCHIK, ANDREW P
STREET ADDRESS	MAIN STREET PO BOX 121
CITY-ST-ZIP	FOREST CITY, PA 18421
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _____ VP   7/31/07   5107859400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #