FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P14752

FTM SPORTS CORPORATION

(0)

Mailing Address

FILED
997 8:00am
tary of State



MIAMI CENTER - SUITE 2000 MIAMI (201 & BISCAYNE BLVD. MIAMI CENTER - SUITE 20 MIAMI FL 33131-4332	ami Center - Suite 2000						
						3. Date Incorporated or Qualified 06/08/1987		of Last Fi 1996	teport
2. Principal Place of Business 2a. Mailing Address 21						4. FEI Number 95-3939875			pplied For of Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State City & State 23 28						Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	Ζιρ 29	Cour	ntry		8. This corporation has liability for in Florida Statutes	ntangible ta Yes 🔀		: 199.032,
	9, Name and Address of Curr	ent Registered Agent				10. Name and Address of New Reg	istered Ag	ent	
			81	Namo					
MIAMI FL 33131			82	Street Addr	ess (P.O. Box Number is Not Acceptable	e)			
				63					
				84	_ ,				Code
11. Pursuant office or r	to the provisions of Sections 607.0 egistered agent, or both, in the Start femiliar with, and accept the ob-	502 and 607,1508, Florida Statut tte of Florida, Such change was a gogliops of Section 607,0505, Ele	es, the ab authorized	ove by	e-named corp the corporal	poration submits this statement for the price ion's board of directors. I hereby accep	urpose of c tithe appoi	nanging it ntnent as	ts registered registered
SIGNATURE	THE TAIL WITH COO GOOD TO OUR	igations of exotion our issue, in	onna olan	0100	•				
SIGNATORIC	Signature, typed or printed name of registered			Ager	ni signalure requir	ed whon reinstating)	DATE		
12.	OFFICERS A	AND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC		DIRECTOR Change	RS IN 12 Addition
TITLE	BOCEK, MARIE D.	ר"ו מנונוג	111011				L	J Griange	[] MOUITON
NAME OXOCET ADDRESS	555 W 5TH STREET		1.2 NAME 1.3 STREE		ADDOLEC]:
STREET ADDRESS CITY-ST-ZIP	LOS ANGELES CA		1.4 CITY - ST		i				ļ
TITLE	8	DELETE	2 1 TITLE		1 - 211			Change	Addition
NAME	LIDDELL, DONALD C.	_	2.2 NAME					_ •	
STREET ADDRESS	633 W. 5TH ST. STE 5400		23 STREE		ADDRESS				
CITY-ST-ZIP	LOS ANGELES CA	•	2 4 CHY		T-ZIP				
TITLE	D	☐ DELETE	31 TITLE					Change	☐ Addition
NAME	BOSWORTH, WARREN		3.2 NAME			•			
STREET ADDRESS	6401 CONGRESS AVE STE1	40	3 3 STREE		ADDRESS				
CITY - ST - ZIP	BOCA RATON FL		3.4. Dr	1Y-S	1 - 2IP				
TITLE	D	DELETE	4 1 111	LE			Ļ	_ Change	Addition
NAME	LOBAUGH, LESLIE E.	•	4 2 NAMI						1
STREET ADDRESS	633 W. FIFTH ST., STE 5400		4 3 STREE						
CITY - ST - ZIP	LOS ANGELES CA	DELETE	4.4 CII		1 - 71P			Change	Addition
TITLE			51 TITLE				L.	_ Griange	Addition {
NAME OZOSCZ LIDODSCO			5.2 NAME		· ·				
STREET ADDRESS			5.3 STREET			•			
CITY-\$T-ZIP TITLE		DELETE	54 CII 6 1 1II		1-211		Г	Change	Addition
NAME			62 NA			•	_		
STREET ADDRESS					ADDRESS				
	64 C								
CITY-ST-ZIP		Last will this files does not such	6 to a throat	1.9	reit l	d in Contine 410 07/3/2) Florido Ctatutos	(Carthan a		100

I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if charged, or on an attachment with an address.