

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 192000000 3491

1. Corporation Name

SPORTS ADVISORY SERVICES, INC.

97 SEP 15 11 0:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

16345 WEST DIXIE HIGHWAY, SUITE 295,
NORTH MIAMI BEACH, FLORIDA 33160

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

LESTER GRUDA
13899 BISCAYNE BLVD., SUITE 106
NORTH MIAMI BEACH, FLORIDA 33181

3. Date Incorporated or Qualified

3a. Date of Last Report

10-28-92

4. FLE Number

Applied For
Not Applicable

65-0374134

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of person filing this statement and not an application)

(Signature of Registered Agent, required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME ASSISTANT SECRETARY

STREET ADDRESS LAURA R. DUNLAP

CITY, ST, ZIP 1201 HAYS ST.

TITLE ☐ DELETE

NAME DIRECTOR

STREET ADDRESS KENNETH MEYERSON

CITY, ST, ZIP 20300-8 NE 3 COURT

TITLE ☐ DELETE

NAME N. MIAMI BEACH, FL 33179

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

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14. 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Laura R. Dunlap

9-15-97

904-222-9171

CR2E034 (9/96)



ACCOUNT NO. : 072100000032

REFERENCE : 528472 7136060

AUTHORIZATION :

Patricia Pyjunt

COST LIMIT : \$ 558.75

ORDER DATE : September 12, 1997

ORDER TIME : 3:0 PM

ORDER NO. : 528472-005

CUSTOMER NO: 7136060

CUSTOMER: Mr. Lester Gruda
Mr. Lester Gruda
13899 Biscayne Blvd, Ste 106
3059498149
Miami, FL 33180

DOMESTIC FILINGS

NAME: SPORTS ADVISORY SERVICES, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Warren Whittaker

EXAMINER'S INITIALS _____

97 SEP 15 PM 4:08
DIVISION OF CORPORATION