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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P92000009780 (7) DOCUMENT #

TIME-OUT SPORTS & RECREATION, INC.

FILED Feb 10 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				- r nasinkār nia rānia ritni dānin bānir Bānir Bānis dānis hānis falit falik falik falik falik falik		
3396. FOXCROFT RD.						
		——————————————————————————————————————				
MIRAMAR FL 33025		MIRAMAR FL 33025			DO NOT WRITE IN THIS SPACE	
US		US			3. Date Incorporated or Qualified 12/04/1992	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		65-0374081	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28	, , , , , , , , , , , , , , , , , , , ,		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	/	8. This corporation owes or has paid the c	
24	25	29	30		Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address of Curre	ent Registered Agent		T-1	10. Name and Address of New Registered	d Agent
HARRIS, JAMES E			81	Name		
	96 FOXCROFT RD.		82 Street Add		idress (P.O. Box Number is Not Acceptable)	
BL	.DG. 3, STE. 213					
· MI	RAMAR FL 33025		63			
			B4	City		85 Zip Code
			"	City	F	L BS ZIP COCC
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508, Florida Statute	es, the abov	e-named cor	poration submits this statement for the purpose	of changing its registered
office or r	egistered agent, or both, in the Stat im familiar with, and accept the obli	te of Florida. Such change was a gations of, Section 607,0505, Flo	authorizea b orida Statute	y tne corpora s.	tion's board of directors. I hereby accept the ap	ppointment as registered
SIGNATURE		3				
SIGNATURE	Signature, typed or printed name of registered a	gent and life if applicable (NOTE	Registered Ag	ent signature requ	fired when re-installing) DATE	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TATLE			Change Addition
NAME	HARRIS, JAMES E		1.2 NAME	ľ		
STREET ADDRESS	3396 FOXCROFT RD., STE.	213, BLDG. 3	1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIRAMAR FL		1.4 CITY-5	SY-ZIP		
TITLE		☐ DELETE	21 TITLE			Change Addition
NAME			22 NAME			
STREET ADDRESS			2.3 STAFET	ADDRESS		
CITY-\$T-ZIP			2 4 DITY-	ST-ZIP		
TITLE		DELETE	31 TITLE			Change Addition
NAME			32 NAME			
STREET ADDRESS			3 3 STREET	ADDRESS		
CITY-ST-ZIP			3 4. CITY-	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			i
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - S	ST-ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			15 198
STREET ADDRESS			5.3 STREET	ADDRESS		1/1/01
CITY-ST-ZIP			5.4 CITY-S			" > \'
TITLE		DELETE	6.1 TITLE	71 EII		Change Addition
NAME			6.2 NAME		2000024266 -02/10/98010430	52
			6.3 STREET	I ADDRESS	-02/10/98010430)15 [
STREET ADDRESS			6.3 STREET		***150 . 00	
THIV. ST. TID			■ 647'HY-5	. I - 21P		

14. Thereby 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.

JAMES HARRIS