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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED Feb 05 1998 8:00am

ANNUAL REPORT 1998	Secretary DIVISION OF CO		Secretary of	f State
	0010083 (3)			
PALM BEACH SPORT BROKERS,	INC.			
Principal Place of Business	Mailing Address			
1760 PALM COVE RD	1760 PALM COVE BLVD			
BLDG 5 #308	BLDG 5 #308			
DELRAY BEACH FL 33445	DELRAY BEACH FL 33445		DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE
US	U\$		12/08/1992	}
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0370011	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	City & State	·		Fee Required
City & State	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the cu	
24 25 9. Name and Address of Curren		30	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
LABRET, JAMES		81 Name	1 0	
1760 PALM COVE BLVD.		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
1760 PALM COVE BLVD. BLDG 5 #308		1 240	VEFFERZON DRIVE	#108
DELRAY BCH. FL 33445		83		•
_		84 City	D	85 Zip Code
	<u></u> 	EERFIELD ISEACH FL	- 35442	
1. 11 Perstuant to the varavisions of Softians 807 050	12 a## 607 1508. Florida Statutes	: the above-pamed cor	rogration submits this statement for the ournose o	of changing its registered
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both in the State agent. Lam familiativith, and advent the 1000	02 ar/d 607.1508, Florida Statutes of Biorida. Such change was au ations of Section 607.0505. Flor	s, the above-named cor ithorized by the corpora ida Statutes	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the app	of changing its registered pointment as registered
	02 ay6 607.1508, Florida Statutes of Bordia. Such change was au attension, Section 607.0505, Flori	s, the above-named con thorized by the corpora ida Statutes.	reporation submits this statement for the purpose of attor's board of directors. I hereby accept the appropriate the purpose of the purpose o	of changing its registered pointment as registered
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tion 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 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 attion or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in a partition or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in a partition of the receiver of trustee.

SIGNATURE: