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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P92000011669

INTERNATIONAL SPORTS CONCEPTS, INC.

| Principal Place of Business Mailing Address        |   |   |                           |                                   |                         |  | ,           |                  |                    |
|--|---|---|---------------------------|-----------------------------------|-------------------------|--|-------------|------------------|--------------------|
| 1231 GARDEN STREET                                 |   | 1231 GARDEN STREET  |                           |                                   |                         |  |             |                  |                    |
| STE. 204   |   | STE. 204  |                           |                                   |                         | DO NOT WRITE IN THIS SPACE   |             |                  |                    |
| TITUSVILLE FL 32796 US TITUSVILLE FL 32796 US      |   |   |                           |                                   |                         | 3. Date Incorporated or Qualifed   |             |                  |                    |
| 03   |   | 00  |                           |                                   |                         | 12/14/1992   |             |                  |                    |
| 2. Principal Place of Business 2a. Mailing Address |   |   |                           |                                   |                         | 4. FEI Number  |             |                  | Applied For        |
| 21   |   | 26  |                           |                                   | 59-3155164              |  | 4           | Not Applicable   |                    |
| Suite, Apt. #, etc.                                |   | Suite, Apt. #, etc.   | Suite, Apt. #, etc.       |                                   |                         | 5. Certifcate of Status Desired  |             | <b>*</b>         | 5 Additional       |
| 22   |   | 27  |                           |                                   |                         | J. Certificate of Otatus Desires   |             | Fee              | Required           |
| City & State                                       |   | City & State  |                           |                                   |                         | 6. Election Campaign Financing   |             |                  | May Be             |
| 23   |   | 28  |                           |                                   | Trust Fund Contribution |  |             | d to Fees        |                    |
| Zip  |   |   | Country                   | ′                                 |                         | 8. This corporation owes the current year Intangible  Personal Property Tax. Yes |             |                  | ₽/No I             |
| 24   | 25 29 30  |   | 0                         | 10. Name and Address of New Regis |                         |  |             |                  |                    |
|  | 9. Name and Address of Currer   | it Registered Agent   | 81                        | ΤN                                | ame                     | To. Name and Address of New I  | CBIOLOIGO A | 90               |                    |
| CERRATO, WALTER A JR.                              |   |   | L                         |                                   |                         |  |             |                  |                    |
|  | GARDEN STREET   |   | 82                        | ! S                               | treet Addres            | ss (P.O. Box Number is Not Accepta   | ble)        |                  |                    |
| TITUSVILLE FL 32796                                |   |   | 83                        | +                                 |                         |  |             |                  |                    |
| _  |   |   |                           |                                   |                         |  |             | T1 =             |                    |
|  |   |   | 84                        | c                                 | ity                     |  | FL          | 85  Zi           | ip Code            |
| office or re<br>agent. I ar<br>SIGNATURE           | to the provisions of Sections 607.050 agistered agent, or both, in the State in familiar with, and accept the obligations of signature, typed or printed name of registered age | of Florida. Such change was auth<br>ations of, Section 607.0505, Florid | norized by<br>la Statutes | the<br>3.                         | corporation             | 's board of directors. I hereby accep when reinstating) ADDITIONS/CHANGES TO OF  | DATE        | unient as        |                    |
| TITLE  | PD DELETE   |   | 1.1 TITLE                 |                                   |                         |  |             | Chang            |                    |
| NAME   | 11  |   |                           | 1.2 NAME                          |                         |  |             |                  |                    |
| STREET ADDRESS                                     | ·   |   |                           | 1.3 STREET ADDRESS                |                         |  |             |                  |                    |
| CITY-ST-ZIP  |   |   | 1.4 CITY-5                |                                   |                         |  |             |                  |                    |
| TITLE  |   |   | 2.1 TITLE                 |                                   |                         |  |             | Chang            | ge                 |
| NAME   |   |   | 2.2 NAME                  |                                   |                         |  |             |                  | (                  |
| STREET ADDRESS                                     | i   |   | 2.3 STREE                 | T ADE                             | DRESS                   | ,  |             |                  |                    |
| CITY-ST-ZIP  | TITUSVILLE FL 32796   |   | 2. 4 CITY-                | ST-ZI                             | P                       |  |             |                  |                    |
| TITLE  | DS  |   |                           |                                   |                         |  |             | Chang            | ge 🗌 Addition      |
| NAME   | STEPHENSON, JAN L./   | •   | 3.2 NAME                  |                                   |                         |  |             |                  |                    |
| STREET ADDRESS                                     | 1231 GARDEN ST.   |   | 3.3 STREE                 | T ADE                             | RESS                    |  |             |                  |                    |
| CITY-ST-ZIP  | TITUSVILLE FL -   |   | 3.4. CITÝ-                | ST-ZII                            | p ~ -                   | ومملكة فرين يابان  |             | ~ <del>- ~</del> | /** <del>-</del> * |
| TITLE  |   | ☐ DELETE  | 4.1 TITLE                 |                                   |                         |  |             | Chang            | ge 🗌 Addition      |
| NAME   |   |   | 4.2 NAME                  |                                   |                         |  |             |                  | · j                |
| STREET ADDRESS                                     |   |   | 4.3 STREE                 | T ADD                             | DRESS                   |  |             |                  |                    |
| CITY-ST-ZIP  |   |   | 4.4 CITY-S                |                                   | ,                       |  |             |                  |                    |
| TITLE  |   | ☐ DELETE  | 5.1 TITLE                 |                                   |                         |  |             | Chang            | ge 🗌 Addition      |
| NAME   |   |   | 5.2 NAME                  |                                   |                         |  |             |                  | . ]                |
| STREET ADDRESS                                     |   |   | 5.3 STREE                 | T ADD                             | DRESS                   |  |             |                  | Ì                  |
| CITY-ST-ZIP  |   |   | 5.4 CITY-5                | ST-ZIF                            | ,                       |  |             |                  |                    |
| TITLE  |   | ☐ DELETE  | 6.1 TITLE                 |                                   |                         |  |             | ☐ Chang          | ge 🗌 Addition      |
| I NAME I   |   |   | 6.2 NAME                  |                                   | 1                       |  |             |                  |                    |

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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP