2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P93000031903

1. Entity Name
SPORT CITY ENTERPRISES, INC.

Principal Place of Business	Mailing Address
4560 TAMIAMI TRAIL	4560 TAMIAMI TRAIL
CHARLOTTE, FL 33980	CHARLOTTE, FL 33980

DO NOT WRITE IN THIS SPACE

02072005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
65-0405542	Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AL-ARNASI, ABRAHAM
4560 TAMIAMI TRAIL
CHARLOTTE HARBOR, FL 33980

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	AL-ARNASI, ABE
STREET ADDRESS	4560 TAMIAMI TRAIL
CITY-ST-ZIP	CHARLOTTE, FL 33980

TITLE	
NAME	
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CITY-ST-ZIP	

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12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Abe Al-Arnasi   2-7-05   941 627 6264
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #