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

Mailing Address

1574 WASHINGTON AVENUE

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

1574 WASHINGTON AVE



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Feb 18 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000040468 (9)

## ATHLETIC ADDICT CORPORATION

US		MIAMI BEACH FL	MIAMI BEACH FL 33139-7801							
		US	US			3. Date Incorporated or Qualified 06/08/1993 Sa. Date of Last Report 06/17/1996				
2. Principal P	Place of Business	2a. Mailing Addre	2a. Mailing Address 26			4. FEI Number 65-0424213	Applied For Not Applicable			
Suite, Apt	#, etc.	27				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & Stat 23		City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip	<b></b>	untry	1	8. This corporation has liability for In			. 199.032,	
24	25 g. Name and Address of Cu	29	30	-			Yes			
LIAC	RIS, LAYNE	irrent Aegistered Agent		B1	Name	10. Name and Address of New Rec	jistered A	gent		
	4 WASHINGTON AVENUE				INDITIO					
MIAMI BEACH FL 33139				82	Street Add	Address (P.O. Box Number is Not Acceptable)				
				83						
					0.1			1		
				B4	City		FL	<b>85</b> Zip	Code	
agent i a	to the provisions of Sections 607 registered agent, or both, in the 5 am familiar with, and accept the c	.0502 and 607.1508, Florida State of Florida. Such chang obligations of, Section 607.0	Statutes, the a e was authorize 505, Florida Sta	bove d by	e-named corp the corporal s.	poration submits this statement for the pi tion's board of directors. I hereby accep	urpose of a t the appo	hanging i ntment as	ts registered registered	
SIGNATURE	Signature, typed or printed name of registere	ed agent and tille if applicable	(NOTE Register	ed Age	ent signature requir	red when reinstating)	DATE		··········	
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12	
TITLE	D	☐ D€L	ETE 1,1 1	ITLE			Ţ	Change	Addition	
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TITLE NAME	LAYNE HARRIS						L	Change	Addition	
STREET ADDRESS	LAGNO TIMERIS			2.2 NAME 2.3 STREET ADDRESS						
CITY-ST-ZIP	1574 WASINADO AN	es. C			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.