

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000013057 (2)

SPORTS FAN-ATTIC INC.

Principal Place of Business	Mailing Address
12927 GULF BLVD., E	12827 GULF BLVD E
MADIERA BEACH FL 33708	Madiera Beach Fl 33708

FILED Jan 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 12927 GULF BLVD E 12927 GULF BLVD E					
	BLVD E EACH FL 33708	12927 GULF BLVD E Madiera Beach Fl 337	08		
				DO NOT WRITE IN THI	S SPACE
				 Date Incorporated or Qualified 02/14/1994 	
·	Place of Business	2a, Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc. 22 City & State		26 Suite, Apt. #, etc. 27 City & State		59-3229862	Not Applicable
				5. Certificate of Status Desired	\$8.75 Additional Fee Required
				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 o	
24	25 25 Name and Address of Currer	29	30	Personal Property Tax due June 30.	Yes XLNo
		it Hegistered Agent	81 Name	10. Name and Address of New Registers	d Agent
	JRDA, JAMES		81 Name		
	12927 GULF BLVD., E			dress (P.O. Box Number is Not Acceptable)	
M	ADIERA BEACH FL 33708			· · · · · · · · · · · · · · · · · · ·	
			83		
			84 City		85 Zip Code
			[-, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,	F	L Jan Barrer
SIGNATURE	Signature, typed or printed name of registered age		- Registered Agent signature req		
12.	OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D D	T] Derese	1,1 TITLE		Change Addition
NAME	OURDA, JAMES		1.2 NAME		
STREET ADDRESS	12927 GULF BLVD., E		1.3 STREET ADDRESS		
CITY-ST-ZIP	MADIERA BEACH FL 33708	DELETE	1.4 CITY-ST-ZIP		Channa Addition
TITLE	D DANNE	DELETE	2.1 TITLE		Change Addition
NAME	DURDA, JOANNE		2.2 NAME		
STREET ADDRESS	12927 GULF BLVD., E		2.3 STREET ADDRESS		
CITY-ST-ZIP	MADIERA BEACH FL 33708	PULLIC	2. 4 CHY-ST-ZIP		Charles Charles
TITLE	}	☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		T sorre	3 4. CITY-ST-ZIP		T About T 4 a tree
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		The same	4.4 CITY-ST-ZIP		
TITLE	{	DELETE	5.1 TIFLE		Change Addition
NAME	!		5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	1		64 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(i), Florida Statules. 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 15 if changed, or on an attachment with an address. if changed, or on an attachment with an address.

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