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May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000019007 (1)

1. Corporation Name

CREATIVE SPORTS ENTERTAINMENT & MANAGEMENT INC.

Principal Place of Business

700 N.W. 57TH PLACE
STE. 16
FORT LAUDERDALE FL 33309-2042

Mailing Address

700 N.W. 57TH PLACE
STE. 16
FORT LAUDERDALE FL 33309-2042

3. Date Incorporated or Qualified
03/07/1994

3a. Date of Last Report
07/22/1996

2. Principal Place of Business
21 700 N.W. 57 PLAKE

Suite, Apt. #, etc.
22 SUITE 16#

City & State
23 FT. LAUDERDALE FLA.

Zip
24 33309

Country
25 USA

2a. Mailing Address
26 700 N.W. 57 PLAKE

Suite, Apt. #, etc.
27 SUITE 16

City & State
28 FT. LAUDERDALE, FLA.

Zip
29 33309

Country
30 U.S.A.

4. FEI Number
65-0475057

Applied For
Not Applicable

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

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

6. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BROPHY, ART
2043 MADISON STREET
HOLLYWOOD FL 33020-6911

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
D
BROPHY, ART
STREET ADDRESS
2043 MADISON STREET
CITY- ST- ZIP
HOLLYWOOD FL 33020-6911

☐ DELETE

TITLE
NAME
D
DYER, ROBERT
STREET ADDRESS
700 N.W. 57TH PLACE STE. 16
CITY- ST- ZIP
FORT LAUDERDALE FL 33309-2042

☐ DELETE

TITLE
NAME

STREET ADDRESS

CITY- ST- ZIP

☐ DELETE

TITLE
NAME

STREET ADDRESS

CITY- ST- ZIP

☐ DELETE

TITLE
NAME

STREET ADDRESS

CITY- ST- ZIP

☐ DELETE

TITLE
NAME

STREET ADDRESS

CITY- ST- ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Art Brophy 4/29/97

Daytime Phone #

0286667

CR2E034 (9/96)