FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

PAID
MAR 31 1996
CK# 3124 $ 200=

DOCUMENT # **P94000023043 (0)**

1. Corporation Name

BATTAGLIA OUTDOORS OF WESTLAND, INC.

Principal Place of Business	Mailing Address
1695 W 49 ST 1544 HIALEAH FL 33012 US	8845 S.W. 132 STREET MIAMI FL 33176

3. Date Incorporated or Qualified: 03/25/1994
3a. Date of Last Report: 04/07/1995

2. Principal Place of Business
21 Suite, Apt. #, etc. 22
23 City & State
24 Zip 25 Country

2a. Mailing Address
26 14951 South Dixie Hwy
27 Suite, Apt. #, etc.
28 City & State: Miami, FL 33176.
29 Zip: 33176 30 Country: USA

4. FEI Number: 65-0489929 ☐ 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

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

9. Name and Address of Current Registered Agent

PREVITI, PETER
5825 SUNSET DRIVE
SUITE 210
MIAMI FL 33143

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 _____ DATE _____
Signature, typed or printed name of registered agent (or officer of agent) (NOTE: Registered Agent's signature required when qualifying)

OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	11 TITLE	☒ Change ☐ Addition
NAME	HANNA, BARRY		12 NAME	
STREET ADDRESS	8845 S.W. 132 STREET		13 STREET ADDRESS	14951 South Dixie Highway
CITY-ST-ZIP	MIAMI FL 33176		14 CITY-ST-ZIP	Miami, Florida 33176.
TITLE	VP	☐ DELETE	21 TITLE	☒ Change ☐ Addition
NAME	HANNA, SONIA		22 NAME	
STREET ADDRESS	8845 SW 132 ST.		23 STREET ADDRESS	14951 South Dixie Highway
CITY-ST-ZIP	MIAMI FL		24 CITY-ST-ZIP	Miami, Florida 33176
TITLE	VP	☐ DELETE	31 TITLE	☒ Change ☐ Addition
NAME	HANNA, GINA		32 NAME	
STREET ADDRESS	8845 SW 132 ST		33 STREET ADDRESS	14951 South Dixie Highway
CITY-ST-ZIP	MIAMI FL		34 CITY-ST-ZIP	Miami, Florida 33176.
TITLE		☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME			42 NAME	
STREET ADDRESS			43 STREET ADDRESS	
CITY-ST-ZIP			44 CITY-ST-ZIP	
TITLE		☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME			52 NAME	
STREET ADDRESS			53 STREET ADDRESS	
CITY-ST-ZIP			54 CITY-ST-ZIP	
TITLE		☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME			62 NAME	700001791347
STREET ADDRESS			63 STREET ADDRESS	-04/23/96--01145--034
CITY-ST-ZIP			64 CITY-ST-ZIP	***200.00

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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, added or deleted.

SIGNATURE: X _____ 4/4/96 (305) 252-7463
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Barry Hanna