

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

SE MAY -1 PM 2:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000024966 (1)

1. Certificate Number

UNIVERSITY SPORTSCARDS AND COMICS INC.

Principal Place of Business
4815 47TH AVE. WEST, #211
BRADENTON FL 34210

Mailing Address
4815 47TH AVE. WEST, #211
BRADENTON FL 34210

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 04/01/1994 3a. Date of Last Report

4. FID Number 65-0479554 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

7. This corporation has liability for information fees under the Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21. 6270 N LOCKWOOD RIDGE RD
State Apt # etc

2a. Mailing Address

26. 5213 - 35th AVE W
State Apt # etc

22. City & State

23. SARASOTA FL

27. City & State

28. BRADENTON FL

24. 34243

25. SARASOTA

29. 34209

30. MANATEE

9. Name and Address of Current Registered Agent

LARSEN, JAMES C
4815 47TH AVE. WEST, #211
BRADENTON FL 34210

10. Name and Address of New Registered Agent

81. Name

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

5213 - 35th AVE WEST

83. City

84. City

BRADENTON

FL

85. Zip Code

34209

11. Pursuant to the provisions of Sections 607.08(3) and 607.15(1)(b) 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 607.08(3) Florida Statutes.

SIGNATURE

Signature of Registered Agent or Person Authorized to Sign

Signature of Registered Agent or Person Authorized to Sign

Signature

12. OFFICERS AND DIRECTORS

12a. NAME P/T
JAMES C LARSEN
12b. STREET ADDRESS 5213 - 35th AVE W
12c. CITY, STATE, ZIP BRADENTON FL 34209

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

13a. NAME ☐ Change ☐ Addition

13b. STREET ADDRESS

13c. CITY, STATE, ZIP

13d. NAME ☐ Change ☐ Addition

13e. STREET ADDRESS

13f. CITY, STATE, ZIP

13g. NAME ☐ Change ☐ Addition

13h. STREET ADDRESS

13i. CITY, STATE, ZIP

13j. NAME ☐ Change ☐ Addition

13k. STREET ADDRESS

13l. CITY, STATE, ZIP

13m. NAME ☐ Change ☐ Addition

13n. STREET ADDRESS

13o. CITY, STATE, ZIP

13p. NAME ☐ Change ☐ Addition

13q. STREET ADDRESS

13r. CITY, STATE, ZIP

13s. NAME ☐ Change ☐ Addition

13t. STREET ADDRESS

13u. CITY, STATE, ZIP

13v. NAME ☐ Change ☐ Addition

13w. STREET ADDRESS

13x. CITY, STATE, ZIP

13y. NAME ☐ Change ☐ Addition

13z. STREET ADDRESS

13aa. CITY, STATE, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntary, true and correct, and does not qualify for the exemption stated in Section 607.08(3)(b) Florida Statutes. I further certify that these facts shall not affect the filing of report of supplemental annual report, return, and accounts and that my signature shall have the same legal effect as if it were made with the officer or officers of the corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on the back of the report as required by Section 607.08(3)(b) Florida Statutes.

SIGNATURE:

James C Larsen JAMES C LARSEN

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

4/27/95

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