

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 MAY -1 PM 12:05

DOCUMENT # P94000044886 (7)

1. Corporation Name

J & B SPORTS ENTERPRISES, INC.

Principal Place of Business

Mailing Address

**15515 MIAMI LAKE WAY NORTH, #206
MIAMI LAKES FL 33014**

**15515 MIAMI LAKE WAY NORTH, #206
MIAMI LAKES FL 33014**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/10/1984

3a. Date of Last Report

N/A

2. Principal Place of Business

2a. Mailing Address

21 650 FALLING WATER Rd

26 650 FALLING WATER Rd

4. FEI Number

65-0498941

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

City & State

23 Ft. LAUDERDALE, FL

28 Ft. LAUDERDALE, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

Zip Country

Zip Country

24 33326

25

29 33326

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HERMAN, JEFFREY M ESQ.
1750 EAST SUNRISE BOULEVARD
THIRD FLOOR
FORT LAUDERDALE FL 33304**

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**TITLE PS
NAME HERMAN, WILLIAM N
STREET ADDRESS 15515 MIAMI LAKE WAY NORTH, #206
CITY - ST - ZIP MIAMI LAKES FL 33014**

**11 TITLE PS
12 NAME HERMAN, WILLIAM N.
13 STREET ADDRESS 650 FALLING WATER Rd
14 CITY - ST - ZIP FT. LAUDERDALE, FL 33326**

☐ Change ☐ Addition

**TITLE VPT
NAME EISNER, JUNE R
STREET ADDRESS 15515 MIAMI LAKE WAY NORTH, #206
CITY - ST - ZIP MIAMI LAKES FL 33014**

**21 TITLE VPT
22 NAME HERMAN, JUNE R.
23 STREET ADDRESS 650 FALLING WATER Rd
24 CITY - ST - ZIP FT. LAUDERDALE, FL 33326**

☒ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

**61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP**

☐ Change ☐ Addition

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 110.07(3)(b), 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 as an attachment with an address.

SIGNATURE:

William N. Herman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/95

(305) 389-5129
Telephone Number

REMITTED BY MAY 1