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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000045498 (0)

FILED
May 05 1997 8:00am
Secretary of State

U S AMATEUR SPORTS, INC. Principal Place of Business Mailing Address 3970 RCA BLVD S970 RCA BLVD SUITE 7010 SUITE 7010 PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410-4231										
US			US				3. Date Incorporated or Qualified 06/14/1994	08/05/1996		
2. Principal Place of	<u> </u>	2a. Mailing Address 26 3932 RCA BLVD				4. FEI Number 65-0538051) 	oplied For	
21 3932 RCA Suite, Apt. #, etc.				26 3932 KCA BLVD Suite, Apt. #, etc.						ot Applicable Additional
SUITE 3209			27 SUITE 3209			5. Certificate of Status Desired			equired equired	
City & State 23 PALM BEACH GARDENS FL			City & State 28 PALM BEACH GARDENS FL			FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24 33410	Country 25 US		Zip 3346	L	untry JS		8. This corporation has liability for Florida Statutes	intangible] Yes [199.032,
	lame and Address of Curren	t Regist	ered Agent				10. Name and Address of New Re	gistered	Agent	
PANAIA, D					81	Name				
10 WYNDI	HAM LN NCH GARDENS FL 33418				82	Street Add	dress (P.O. Box Number is Not Acceptal	ss (P.O. Box Number is Not Acceptable)		
PALM DEA	ICH CHINENS FL 33418				83					
					L					
					84	City		FL	85 Zip	Code
SIGNATURE	typed or proted name of registered age OFFICERS ANI	ent and title i	l aprilicable		ed Ap		poration submits this statement for the pation's board of directors. I hereby accented when reinstating. ADDITIONS/CHANGES TO OFFICE	DATE		
TIFLE DPS			☐ DELETE		TITLE				Change	Addition
	AIA, DAVID			1.2	NAME					
DAL	VYNDHAM LN M BEACH GARDENS FL 3	2410		1		ADDRESS				
TITLE TD	M DEACH GANDENS IL S	J4 10	DELETE		CITY-S TITLE	ST-ZIP			Change	Addition
7-120	GMAN, GERALD		□ precir		NAME	- 1			L. Orango	Manual Manual
STREET ADDRESS 1069	22 HIDDEN LAKE CIRCLE					ADDRESS	y i			
	M BEACH GARDENS FL			2.4	CITY-	ST- ZIP	, , , , , , , , , , , , , , , , , , ,	1345		
TITLE SD	MAG TUDIAG I		☐ DELETE		TITLE	T	·		Change	Addition
1 004	MAS, THOMAS L I DOGWOOD CIRCLE			1	NAME	[
DAL	M BEACH GARDENS FL			1		ADDRESS				
CHY-ST-7IP FAL	MODICII OXODIIO IS		DELETE		LITLE	ST-ZHP		·····	Change	Addition
NAME					NAME]				
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STREET ADDRESS						ADDRESS				
CITY - ST - ZIP Total	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		DELETE		CITY-S TITLE	31 - ZIP			Change	Addition
NAME			F" DETERM	1	name	}			T CHRUBS	אונייניניטיא בייי
STREET ADDRESS						ADDRESS				
City-SI-ZiP					CHTY-S	Į.				
VIII - 01 - 40 1							d in Coston 140 07(0)(i) Florido Diet to			

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 Brock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

ASVASER 4/28/97 (56) 622-Dayline Phone V