## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000054930 (0)

ADSPORT, INC.
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Principal Place of Business Mailing Address 200 EAST ROBINSON STREET 200 EAST ROBINSON STREET SUITE 830 SHITE 830 ORLANDO FL 32801 ORLANDO FL 32801 3. Date Incorporated or Qualified 3a Date of Last Report 07/25/1994 03/08/1995 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3262883 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Zin Country 8. This corporation has liability for intangible tax under s. 199.032 24 Florida Statutes Yes No 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 A.G.C. CO Number is Not Acceptable) 200 S. ORANGE AVE. 82 160BINSON **SUITE 2300** 83 ORLANDO FL 32801 Zip Code 3 > Bo (8 85 11. Pursuant to the provisions of Sections 607,0502 and 607 1508, Florida Statules, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. HARS CALE of grantine required when revisitating) CALE CALE CONTROL OF STORY OF STOR SIGNATURE 6110/01 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1 I TITLE | Change | Addition ŏ HARDY, HARVEY B NAME 1.2 NAME CR2E034 200 EAST ROBINSON STREET, SUITE 830 STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32801 CITY - ST - ZIP 14 City - ST- ZIP DELETE THILE 2.1 1:TLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CHTY-ST-ZIP 2 4 CITY - ST - ZIP TITLE DELETE 3.1 TiTLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - Z:P DELETE Change Addition TITLE 51 TiffLE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS DITY-ST-ZIP 5.4 CiTy - ST - 7/P TITLE DELETE Change Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY - ST - ZIP

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)(k). 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 it 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, for on an attachment with an address.

SIGNATURE:

OF PRINTED OFFICER OR DIRECTOR B. HARDY 6/10/96 849-1222