

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000015067 (8)

1. Corporation Name
BASEBALL CITY, INC.



Principal Place of Business

10231 NW 24 ST
SUNRISE FL 33322

Mailing Address

10231 NW 24 ST
SUNRISE FL 33322

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

ENTIN, RICHARD C
8411 W OAKLAND PARK BLVD
SUITE 202
SUNRISE FL 33351

81 Name

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

83

84 City

FL 85 Zip Code

3. Date Incorporated or Qualified

02/17/1995

3a. Date of Last Report

4. FLL Number

65-0571592

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

10. Name and Address of New Registered Agent

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 of person appointed as registered agent or director

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
D
GONZALEZ, JERI
10231 NW 24 ST
SUNRISE FL 33322

DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DELETE

DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DELETE

DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DELETE

DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DELETE

DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
DELETE

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
13. STREET ADDRESS
14. CITY-STATE-ZIP
2. TITLE
22. NAME
23. STREET ADDRESS
24. CITY-STATE-ZIP
3. TITLE
32. NAME
33. STREET ADDRESS
34. CITY-STATE-ZIP
4. TITLE
42. NAME
43. STREET ADDRESS
44. CITY-STATE-ZIP
5. TITLE
52. NAME
53. STREET ADDRESS
54. CITY-STATE-ZIP
6. TITLE
62. NAME
63. STREET ADDRESS
64. CITY-STATE-ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

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 119.07(4)(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 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeri Gonzalez

(954) 749-7161

CR2E034 (12/95)