## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000015067 (8)

BASEBALL CITY, INC.

**FILED** Mar 24 1998 8:00am Secretary of State

|--|--|

Principal Plac	e of Business	Mailing Address			-	VALAT ITAB! Aftli Bülla İtili		
10231 NW 24 ST 10231 NW 24 ST SUNRISE FL 33322 SUNRISE FL 33322					DO NOT WRITE IN THIS SPACE			
					<ol> <li>Date Incorporated or Qualified</li> <li>02/17/1995</li> </ol>			
	Place of Business	2a. Mailing Address			4. FEI Number	Apr	plied For	
21		26			65-0571592	No	t Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	☐ \$8.75 A		
City & State City & State				6. Election Campaign Financing	\$5.00	Мау Ве		
23	28		·		Trust Fund Contribution	Added to	o Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid			
24	25   29   30   9. Name and Address of Current Registered Agent				Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent			
FAI	<del></del>	rent Negistered Agent	81 1	lame	10. Name and Address of New Regis	stered Agent		
	ITIN, RICHARD C		["]	iairie				
8411 W OAKLAND PARK BLVD SUITE 202			<b>82</b> S	treet Addre	ss (P.O. Box Number is Not Acceptable	)		
	INRISE FL 33351		83	•				
			<b>84</b> C	ity		FL 85 Zip C	òde	
11, Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statut-	es, the above-na	amed corpo	ration submits this statement for the pur		registered	
office or i	registered agent, or both, in the St	ate of Florida, Such change was a	authorized by the	e corporatio	oration submits this statement for the pur on's board of directors. I hereby accept t	the appointment as r	registered	
l	and decopy the op-	inganiona di, baction todi. Casta, i ic	rida Statutos.					
SIGNATURE	Signature, typed or printed name of registered	agent and title it applicable (NOT)	E: Registered Agent si	gnature required	d when reinstating)	DATE		
12.	OFFICERS :	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR!	\$ IN 12	
TITLE	D	DELETE	1.1 TITLE			Change	Addition	
NAME	GONZALEZ, JERI		1.2 NAME					
STREET ADDRESS	10231 NW 24 ST		1.3 STREET ADD	RESS				
CITY - ST - ZIP	SUNRISE FL 33322		1.4 CITY-ST-ZI	P				
TITLE	V	☐ DELETE	2.1 TITLE			☐ Change	Addition	
NAME	GONZALEZ, FELIX		2.2 NAME		•			
STREET ADDRESS	10231 NW 24 STREET		2.3 STREET ADD	RESS				
CITY-ST-ZIP	SUNRISE FL		2. 4 CITY - ST - Z	IP ·				
TITLE	\$	☐ DELETE	3.1 TITLE			Change	Addition	
NAME	GONZALEZ, CAROLS		3.2 NAME					
STREET ADDRESS	10231 NW 24 ST.		3.3 STREET ADD	RESS				
CITY-ST-ZIP	SUNRISE FL		3 4. CITY-ST-Z	IP .		·		
TITLE		☐ DELETE	4.1 TITLE			Change	Addition	
NAME			4. 2 NAME	1				
STREET ADDRESS			4.3 STREET ADD	RESS				
CITY-ST-ZIP			4.4 CITY - ST - ZI	P				
TITLE		☐ DELETE	5.1 TITLE			Change	Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADD					
CITY-ST-ZIP		T actor	5.4 CITY - ST - ZI	P				
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADD	ress				

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

SIGNATURE: Jeri Conzalaz