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

CORPORATION ANNUAL REPORT



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

1996 DIVISION OF CORPORATIONS							
	MENT # P95	000033931	l (3)				
THE D	DUGOUT INC.						
Principal Place of Business Mailing Address					}		(1516 1010) N181 1101 1051
2001 SOUTH SURF ROAD		2001 SOUTH	SURF ROAD				
HOLLYWOOD FL 33019		HOLLYWOOD					
					3. Date Incorporated or Qualified 04/26/1995	3a. Date of t	ast Report
2. Principal Pla	ace of Business	2a. Mailing Addre	ess		4. FEI Number - 65 05 88 44	9	Applied For Not Applicable
Suite, Apt. #	r, etc.	Suite, Apt. #,	etc.		5. Certificate of Status Desired	□ \$	8.75 Additional Fee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
23 Zip	Country	Zip	Countr	у	8. This corporation has liability for	intang ble tax ur	
24	25	29	30				es
	9. Name and Address of C	urrent Registered Agent	81	Name	10. Name and Address of New F	legistered Age	nl
\$COTT	HIIDV			7.0			
SCOTT, JUDY 2001 SOUTH SURF ROAD			82	Street Add	ress (P.O. Box Number is Not Acceptat	ж)	
	WOOD FL 33019		83	3			
			84	1 City		8	5 Zip Code
		0500 and 607 1509 Florid	Statutes the observe	named como	ration submits this statement for the pu	ruses of changin	on its registered office
or registers	o the provisions of Sections 607 ed agent, or both, in the State of th, and accept the obligations of,	t Florida. Sucti change was i	authorized by the cor	poration's boa	ard of directors. Thereby accept the app	ointment as reg	stered agent. Lam
	in, and accept the obligations of	, Section 607.0300, Florida	Statutes.				
SIGNATURE ,	Signature, typied or printed nan o of registere		(NOTE Brigistered Ag	ent signature require		LIATE	
12. Inte		S AND DIRECTORS	13. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFF	·	hange Addition
NAME	PRES DELETE		1.2 NAME			Δ.	
STREET ADDRESS	2001 5.50R	FRD	13 STREE	ET ADDRESS			
CITY-ST-ZIP	2001 5.50R Hollywood F	IA 33019	14 CITY -	· \$1 - 71P			
TITLE	DELFIE 2		ETE 2 1 TITLE	=			hange 🔲 Addition
NAME			2.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		□ DEU	FTE 3 1 TITLE			П (nange Addition
NAME:			3 2 NAME				, <u>L</u>
STREET ADDRESS				ET ADDRESS			
C-TY-ST-ZiP			3 4 CITY	- S1 - ZIP			
T-TLF		☐ DEL	ETE 4.1 THE	t .		□ 0	Change 🔲 Addition
NAME			4.2 NAM6				
STREET ADDRESS				EL ADDRESS			
CITY-ST-ZIP		□ DC1	440-17				Change Addition
TIFLE		☐ DF1		i .		Π,	Change
NAME CHICK LADDDECC			1012 E a	ET ADDRESS			
STHEET ADDRESS			5.4 CITY				
CITY+ST-ZIP TITLE		☐ DEI					Change 🔲 Add tion
NAME			6.2 NAMI				
STREET ADDRESS			63 S*HE	ET ADDRESS			
Crty-St-ZrP			6.4 CHY	-\$1 · ZIF			
14. I do hereb	y certify that the information sup	plied with this filing is volunt	arily furnished and do	es not quality	for the exemption stated in Section 119	9.07(3)(k), Florida	Statutes, 1 further

Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1 do hereby 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 certify that I am an officer or director of the corporation or the receiver or trusted 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.

IGNATURE:

| Cottain Price | Chapter Of Chapter Of

SIGNATURE: