

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

FILED
Mar 27 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000034685 (4)
 1. Corporation Name
KJB SPORTS & ENTERTAINMENT MARKETING, INC.



Principal Place of Business 1621 EASTLAKE WAY FORT LAUDERDALE FL 33326	Mailing Address 1621 EASTLAKE WAY FORT LAUDERDALE FL 33326-2736
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3. Date Incorporated or Qualified 05/03/1995	3a. Date of Last Report 02/05/1996
4. FEI Number 65-0577329	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

21. Principal Place of Business 2510 GOLF VIEW DR	2a. Mailing Address 2510 GOLF VIEW DR
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State FT. LAUDERDALE FL	26. City & State FT. LAUDERDALE FL
24. Zip 33327	29. Zip 33327
25. Country	30. Country

9. Name and Address of Current Registered Agent
**EPSTEIN, JOSEPH A
 1621 EASTLAKE WAY
 FT LAUDERDALE FL 33326**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	2510 GOLF VIEW DR
83	
84 City	FT. LAUDERDALE FL
85 Zip Code	33327

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 _____ (NOTE: Registered Agent's signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P <input type="checkbox"/> DELETE
NAME	HUNTER-EPSTEIN, KIP
STREET ADDRESS	1621 EASTLAKE WAY
CITY-ST-ZIP	FORT LAUDERDALE FL 33326
TITLE	VP <input type="checkbox"/> DELETE
NAME	EPSTEIN, JOSEPH A
STREET ADDRESS	1621 EASTLAKE WAY
CITY-ST-ZIP	FT LAUDERDALE FL 33326
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	2510 GOLF VIEW DR
1.4 CITY-ST-ZIP	FT. LAUDERDALE FL 33327
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	2510 GOLF VIEW DR
2.4 CITY-ST-ZIP	FT. LAUDERDALE FL 33327
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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

SIGNATURE:  **3/24/97** **954-463-3833**
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)