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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000069954 (2)

SPORTS PAGE PUB & RESTAURANT, INC.

FILED Apr 25 1997 8:00am Secretary of State



Principal Place	e of Business	Mailing A	Mailing Address 113 SO. HOMESTEAD BLVD. HOMESTEAD FL 33030-7421					
113 80. HOME HOMESTEAD F								
						3. Date Incorporated or Qualified 09/11/1995	3a. Date of L	•
2. Principal P	lace of Business	2a. Mailir	ng Address		, , , , , , , , , , , , , , , , , , , ,	4. FEI Number		Applied For
21		26				65-0609757 Not Applicable		
Sulte, Apt	#, etc.	Suite, Apt. #, etc.				5 Cortificate of Status Decired \$8.75 Additional		
22		27				5. Certificate of Status Desired		ee Required
City & State	0	City &	State			6. Election Campaign Financing	\$5	.00 May Be
23		28				Trust Fund Contribution	A	dded to Fees
Zip	Country	Zip		Cour	ntry	8. This corporation has liability for i		der s. 199.032,
24	25	29		30			Yes No	
	9. Name and Address of Curre	nt Registered	Agent		81 Namo	10. Name and Address of New Re		
9500	INETT, GARY B O SO. DADELAND BLVD. STE 79 MI FL 33156	02		-	82 Styept Add 83 City 41	mes R. Pierce Grings Aress (P.O. Box Number is Not Acceptable) M.E. Sylven Omes TEAD	FL 85	Zip Code 33030
office or r agent 1 a SIGNATURE	Signature: typed or printpol name of represented of	galope of Section and tile of applications of the depth of the dampite of the dam	ee (NO	II - Registered	Agent signature requ	rporation submits this statement for the pation's board of directors. I hereby acception when reinstating ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRE	CTORS IN 12
TITLE	PD		DELETE	1,1 1)1	LF			iange 🔲 Addition
NAME	YAMAMURA, HERBERT T			1.2 NA	Mέ			
STREET ADDRESS	25251 SW 139TH AVENUE			1.3 \$11	REET ADDRESS			
City-St-ZIP	MIAMI FL 33032		T 50		Y-ST-ZIP		F-1-2:	
TITLE	V		☐ DELETE	2.1 THT	LF			nange Addilio
NAME	MCGANN, GREG			2.2 NA	ME			
STREET ADDRESS	23700 SW 162 AVE.			2351	REET ADDRESS			
CITY-ST-ZIP	HOMESTEAD FL 33031		₩ no.cri		IY-SI-ZIP	ــــــــــــــــــــــــــــــــــــــ		A 100
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NAME	SOTO, JEAN		-	3.2 NA	ME K	TUDA SIN 211 Tens		
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CITY-ST-ZIP	HOMESTEAD FL 33031		-		IY-S1-7iP	Nomes TEAD IFC. WW	·	
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NAME				4. 2 N/	IME			
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NAME	1			5.2 NA	ME			
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NAME				6.2 NA	ME			
STREET ADDRESS					REET ADDIRESS			
CITY-ST-ZIP					Y-S1-ZIP			
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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.