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FILED
Jul 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000085461 (8)

1. Corporation Name

CREATIVE SPORTS MANAGEMENT, INC.

Principal Place of Business

~~3303 SUNSET WAY N~~
~~LAKELAND FL 33809~~
US

Mailing Address

P.O. BOX 4553
TAMPA FL 33677
US

2. Principal Place of Business

21 8020 ST. PETER AVE. N.

Suite, Apt. #, etc.

22

City & State

23 TAMPA, FL

Zip

24 33614

Country

25 Hillsborough

2a. Mailing Address

26 P.O. BOX 4553

Suite, Apt. #, etc.

27

City & State

28 TAMPA FL

Zip

29 336774553

Country

30 Hillsborough

g. Name and Address of Current Registered Agent

GILMORE, RICARDO L
334 SOUTH HYDE PARK AVENUE
TAMPA FL 33606

81 Name

GILMORE, RICARDO L

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

101 E. KENNEDY BLVD STE 3200

83

84 City

TAMPA

FL

85 Zip Code

33601

3. Date Incorporated or Qualified

11/06/1995

4. FEI Number

59-3352553

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD

NAME MYLES, FRANK

STREET ADDRESS 4713 PURITAN CIRCLE

CITY-ST-ZIP TAMPA FL 33617

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

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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:

Frank Myles

4/28/98 (813) 915-1319

CR2E034 (10/97)