FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT **1997**

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

FILED
Apr 17 1997 8:00am
Secretary of State

DOCUMENT # **P95000091485 (9)**

1. Corporation Name
SPORTS MAX CORP.

Principal Place of Business
2800 ONE ATLANTIC CENTER
1201 WEST PEACHTREE ST.
ATLANTA GA 30309-3400

Mailing Address
2800 ONE ATLANTIC CENTER
1201 WEST PEACHTREE ST.
ATLANTA GA 30309-3400

3. Date Incorporated or Qualified: **12/01/1995**
3a. Date of Last Report: **03/11/1996**

2. Principal Place of Business
21 9118 Cypress Green Dr.
Suite, Apt. #, etc.
22 Suite 110
City & State
23 Jacksonville, FL
Zip 24 32256
Country 25

2a. Mailing Address
26 Same as 2
Suite, Apt. #, etc.
27
City & State
28
Zip 29
Country 30

4. FEI Number 58-2216602 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. **Name and Address of Current Registered Agent**
THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____
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	☐ DELETE
NAME	YAMAMOTO, YOICHIRO	
STREET ADDRESS	TOMOBUCHI 1-4-1	
CITY-ST-ZIP	OSAKA, JAPAN	
TITLE	SD	☐ DELETE
NAME	IMAYA, KAZUHIKO	
STREET ADDRESS	SYOTEIOTANO 3-43-35	
CITY-ST-ZIP	OSAKA, JAPAN	
TITLE	T	☐ DELETE
NAME	TAKAHASHI, TORU	
STREET ADDRESS	NISHIMIYAHARA 2-7224	
CITY-ST-ZIP	OSAKA, JAPAN	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (9/96)

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: YAMAMOTO, YOICHIRO JANUARY 30, 1997
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0011628