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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS 156005 75

1996

P95000097299 (8)

DOCUMENT # MIAMI SPORT AND SOCIAL CLUB, INC. Principal Place of Business Mailino Address 414 NORTH ORLEANS 414 NORTH ORLEANS SUITE 708 SHITE 709 CHICAGO IL 60610 CHICAGO IL 60610 3. Date Incorporated or Qualified 3a. Date of Last Report 12/20/1995 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s 199.032, 24 ☐ Yes ☐ No Florida Statutes 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEMS, INC. 82 Street Address (P.O. Box Number is Not Acceptable) 110 MAGNOLIA STREET 83 TALLAHASSEE FL 32301 84 City 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 have of registered agent and title happlicable (NOTE: Registered Agent signature required when reinstalling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 150 C Minctor DELETE 1. 1 TITLE Change Addition Sandra M. Thumas NAM: 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS # 60610 DELETE C-TY - ST - ZIF 1.4 C(TY-\$1-7)P TITLE 2. 1 1ITLE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2.4 CITY - \$1 - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY - ST - ZIP 3.4 CITY - ST - ZIP DELETE TILLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY-ST-ZIP DELETE TITLE Change Addition 5.1 TITLE **E000001836136** -05/23/96--01012--021 NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS ***225.00 CITY-ST-ZIP 5.4 CITY - ST - ZIP TOTALE DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS

14. To hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 logal effect as if made under oath; that I am an officer on linear or the corporation or the received or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block

64 CITY-ST-ZIP

SIGNATURE:

CHTY-ST-ZIP

(12/95)

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