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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF CTATE

Sandra B. Mortham

**FILED** 

May 19 1997 8:00am

Secretary of State

- - 1844 BOL 180 CHINA TOLKA AMAR OBLIK BOLLI BAKA 1846 HOLLA AKAR AKAR KANA

Socretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000097299 (8)

MIAMI SPORT AND SOCIAL CLUB, INC.

Ex. 1 Fee			<del></del>		
Principal Place of Business Mailing Address					tikien sater tilligen billigen einer falle biller
414 NORTH ORLEANS SUITE 708 CHICAGO IL 60610		414 NORTH ORLEANS SUITE 708 CHICAGO IL 60610-4418			
				<ol> <li>Date Incorporated or Qualified 12/20/1995</li> </ol>	3a. Date of Last Report 05/22/1996
2. Principal f 21	hade of Business	2a. Mailing Address 26		4. FEI Number  APPLIED FOR 36-41	Applied For Not Applicable
Suite, Apt	#, ctc	Suite, Apt #, etc.			<b>CO 75</b>
2		27		5. Certificate of Status Desired	Fee Required
City & State	( · · · · · · · · · · · · · · · · · · ·	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Z(μ - 1	Country	Zip	Country	8. This corporation has liability for in	T
24	25	[29]	30		Yes No
	9. Name and Address of Cur	rent Hegistered Agent	81 Name 1	10. Name and Address of New Reg	istered Agent
	ALEN, PETER		I Ivaille	lichelle Deun	
	EAST JACKSON ST.		82 Street A	dress (P.O. Box Number is Not Acceptabl	o) # B5
SUITE 104			83 33	3 3. PWIT HVE	T D 3
, ORL	ANDO FL 32801		63		
			84 City	T 200 000	85 Zip Code
## [] as less	t to a second Continue COT 6	VEGO and COT SEGO Flatido Otat.		when	FL 33006
office or r	registered agent, or both, in the Sta	ate of Florida. Such change was	authorized by the corpo	orporation submits this statement for the puration's board of directors. I hereby accept	the appointment as registered
agent La	ini fam lar with, and accept the ob	ligations of, Section 607.0505, F	lorida Statutes.		•
SIGNATURE	10/Chill Dxn		TE: Registered Agent signature re		DATE
12.	Signature, to led or printed name of registered OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	PSD	DELETE	1.1 DTLE	110011010101111110101101	Change Addition
NAME	THOMAS, SANDRA M	<b>—</b>	1.2 NAME		
STHEE! ACCORESS:	414 NEW ORLEANS, #708		1.3 STREET ADDRESS		
City ST ZIP	CHICAGO IL 60610		1.4 City+ST-ZIP		
Tille		☐ DELETE	21 TITLE		Change Addition
NAME		<del></del>	2.2 NAME		
STREET ACHIEFSS			2.3 STREET ADDRESS		
CHY - SE- ZIP			2. 4 CITY - ST-₹IP		
11'15		☐ DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CHTY-ST-ZH			3.4. CITY - ST - ZIP		
THE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 HAME		
STREET ACDRESS			4.3 STREET ADDRESS		
C(1) - S1, 7(P)		· · · · · · · · · · · · · · · · · · ·	4.4 CITY-ST-ZIP		
IITE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
N4Mi			5.2 NAME	50000219	6575
STREET ADDRESS			5.3 STREET ADDRESS	50000219 -05/30/970110 ***165.00	1023
C 1Y - 5" - 7IP		······································	5.4 CITY · ST - ZIP	***165.00	
Tille		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		CS
STREET ADDRESS:			6.3 STREET ADDRESS		cs 5/19/97
C TY - ST - ZiP		P - 2 - 24 A - 26 - 1 - 1	6.4 CITY - ST - ZIP		, , , ,
informatio	on indicated on this annual report o	or supplemental annual report is:	true and accurate and t	ted in Section 119.07(3)(i), Florida Statutes hat my signature shall have the same legal	effect as if made under oath, that
Lam ab o		i or the receiver or trustee empoy	vered to execute this re-	port as required by Chapter 607, Florida St	
opposits)	in block iz of block to it changed	or on an autopinioni with an ad	U1000.	0	