


FILED

May 08 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS		May 08 1997 8:00am <b>Secretary of State</b>	
DOCUMENT # <b>P96000007073 (5)</b>					
1. Corporation Name <b>FITNESS EDGE GOLF PRODUCTS, INC.</b>					
Principal Place of Business <b>1194 D. SHIBUMY CIR. WEST PALM BEACH FL 33415</b>		Mailing Address <b>1194 D. SHIBUMY CIR. WEST PALM BEACH FL 33415-4764</b>			
2. Principal Place of Business <b>21 4931 Cyprus Ln. WPB FL 33417</b>		2a. Mailing Address <b>26 4931 Cyprus Ln. WPB FL 33417</b>		3. Date Incorporated or Qualified <b>01/19/1996</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. Date of Last Report	
City & State <b>23 West Palm Beach</b>		City & State <b>27 West Palm Beach</b>		4. FEI Number <b>65-0659972</b>	
Zip <b>24 33417</b>		Country <b>25 Palm Beach</b>		Applied For <input type="checkbox"/> Not Applicable	
		Zip <b>29 33417</b>		Country <b>30 Palm Beach</b>	
g. Name and Address of Current Registered Agent <b>SUKER, EDWARD F 1194 D. SHIBUMY CIR. WEST PALM BEACH FL 33415</b>				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
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.				10. Name and Address of New Registered Agent	
SIGNATURE: <b>EDWARD F. Suker</b> <i>Edward F. Suker</i> <b>4/7/97</b>				DATE	
Signature, typed or printed name of registered agent and title if applicable				(NOTE: Registered Agent signature required when reinstating)	
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	1.1 TITLE	1.2 NAME
<b>President</b>	<b>Edward F. Suker</b>	<b>1194 D. Shibumy Cir.</b>	<b>WPB FL 33415</b>		
				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
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: <b>Edward F. Suker</b> <b>EDWARD F. SOKER</b> <b>4/7/97</b> <b>561-616-0207</b>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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