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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P96000030417 (5)

NATIONAL GYMNASTICS, INC.

**FILED** Feb 25 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					4 sebulani ita ibuià antis antis abiti abiti	BRIGE Bins Geitt Gröch tiett febt fabt	
2901 S.W. 31		2801 S.W. 31ST AVENU					
PEMBROKE PARK FL 3		PEMBROKE PARK FL 3	PEMBROKE PARK FL 3		DO NOT WRITE IN	DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified		
					04/08/1996		
2. Principal Pi	iace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26		65-0662197	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional	
22		27			b. Certificate of Status Desired	Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid		
24	25	29	30		Personal Property Tax due June 30		
	g. Name and Address of Cur	rent Registered Agent	-	1 Name	10. Name and Address of New Regis	stered Agent	
	EENBERG, STUART		•	1 Name	9		
	01 S.W. 31ST AVENUE		8	2 Street	treet Address (P.O. Box Number is Not Acceptable)		
PE	MBROKE PARKS FL		8	-			
			ľ	3			
			8	4 City		FL 85 Zip Code	
11. Pursuant I	to the provisions of Sections 607.0	0502 and 607.1508, Florida Statu	ites, the abo	ve-name	d corporation submits this statement for the pur	nose of changing its registered	
office or re	egistered agent, or both, in the St	ate of Florida, Such change was	authorized Iorida Statut	by the col	propration's board of directors. I hereby accept t	he appointment as registered	
	Stuart Green	Lyc	io rad blatat				
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NC	TE. Registered A	gent signatur	re required when reinstating)	DATE	
12.	OFFICERS :	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	D	☐ DELETE	1.1 TITU			☐ Change ☐ Addition	
NAME	Greenberg, stuart e		1.2 NAM	Ē			
STREET ADDRESS	2801 S.W. 31ST AVE.		1.3 STRE	ET ADDRESS	6		
CITY-ST-ZIP	PEMBROKE PARK		1.4 CITY	- ST - ZIP			
TITLE		☐ DELETE	2.1 TITLE			Change Addition	
NAME			2.2 NAM	E			
STREET ADDRESS			2.3 STRE	ET ADDRESS	· [		
CITY-ST-ZIP				-ST-ZIP			
TiTL€		L_] DELETE	3.1 TITLE			Change Addition	
NAME			3.2 NAM				
STREET ADDRESS				ET ADDRESS	1		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		-ST-ZIP		Obassa Clauser	
TITLE		☐ DELETE	4.1 TITLE			Change Addition	
NAME			4. 2 NAN	<del>-</del>		İ	
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY			Cloude Classes	
TITLE		DELETE	5.1 TITLE			Change Addition	
NAME			5.2 NAM	E			
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY				
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAM	E			
STREET ADDRESS			6.3 STRE	ET ADDRESS	<b>i</b>		
CITY-ST-ZIP			6.4 CITY	-ST-ZIP			

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.