

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED  
Sep 19 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000043759 (5)

1. Corporation Name

UNIVERSAL SPORTS NETWORK, INC.

Principal Place of Business

2419 UNIVERSITY DRIVE  
CORAL SPRINGS FL 33065

Mailing Address

2419 UNIVERSITY DRIVE  
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/22/1996

3a. Date of Last Report

4. FEI Number

☒ Applied For  
☐ Not Applicable

6. 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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 2419 UNIVERSITY Drive

2a. Mailing Address

22 Suite, Apt. #, etc.

23 City & State

CORAL SPRINGS, FL

24 Zip 33065

25 Country

BROWARD

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

MITTELBERG, BARRY S  
2417 UNIVERSITY DRIVE  
CORAL SPRINGS FL 33065

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

*Norman S. Braslow*

Signature, typed or printed name of registered agent and title if applicable

*Norman S. Braslow*

(NOTE: Registered Agent signature required when reinstating)

DATE

9/17/97

12.

OFFICERS AND DIRECTORS

TITLE

PD

NAME

BRASLOW, NORMAN

STREET ADDRESS

2419 UNIVERSITY DRIVE

CITY-ST-ZIP

CORAL SPRINGS FL 33065

TITLE

VD

NAME

FERFER, DALIA

STREET ADDRESS

2419 UNIVERSITY DRIVE

CITY-ST-ZIP

CORAL SPRINGS FL 33065

TITLE

DELETED

NAME

DELETED

STREET ADDRESS

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CITY-ST-ZIP

DELETED

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

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

*Norman S. Braslow*

CR2E034 (4/97)