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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

P96000070506 (6)

MASTERTURF INC.

| Principal Place of Business                             | Mailing Address |  |  |
|---|-----------------|--|--|
| 226-5 SOLANA ROAD STE 110<br>PONTE VENRA REACH EL 32082 | 226-5 SOLANA R  |  |  |

**FILED** Apr 28 1997 8:00am Secretary of State



| istered Agent   | 83<br>84 City  | 3. Date Incorporated or Qualified  08/22/1996  4. FEI Number  5 9 - 33 9 6 6 5 2  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability for in Florida Statutes  10. Name and Address of New Redress (P.O. Box Number is Not Acceptate)  | Yes No gletered Agent  Cxrov PM  |
|---|--|--|--|
| Suite, Apt. #, etc.  City & State  Zip                | 81 Name<br>82 Street Add<br>83 R4 City   | 59 -33 9665  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability for in Florida Statutes  10. Name and Address of New Records  | Not Applic   \$8.75 Additions   Fee Required   \$5.00 May Be   Added to Fees   No   No   Sistered Agent   Cxrox   March   Cxrox   March   Marc |
| Suite, Apt. #, etc.  City & State  Zip  Istered Agent | 81 Name<br>82 Street Add<br>83 R4 City   | 5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability for in Florida Statutes  10. Name and Address of New Re  | \$8.75 Additions Fee Required \$5.00 May Be Added to Fees Intangible tax under s. 199.03 Yes No gistered Agent  Corror Ma  |
| City & State Zip Zip                                  | 81 Name<br>82 Street Add<br>83 R4 City   | 6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability for in Florida Statutes  10. Name and Address of New Re-   | Fee Required  \$5.00 May Be Added to Fees Intangible tax under s. 199.03  Yes No Sistered Agent  Corror Fill  The Corror Fill  The State of The Corror Fill  |
| Zip<br>Zip<br>Istered Agent                           | 81 Name<br>82 Street Add<br>83 R4 City   | Trust Fund Contribution  8. This corporation has liability for in Florida Statutes  10. Name and Address of New Records  11. Market Market Statutes  | Added to Fees intangible tax under s. 199.03 Yes No gletered Agent  Cxrov  |
| Zip<br>Istered Agent                                  | 81 Name<br>82 Street Add<br>83 R4 City   | 8. This corporation has liability for it Florida Statutes  10. Name and Address of New Recent Statutes  10. Market Market Statutes Statute | ntangible tax under s. 199.03  Yes No Sistered Agent  Cxror Fill  He   |
| istered Agent   | 81 Name<br>82 Street Add<br>83 R4 City   | Florida Statutes  10. Name and Address of New Reg  | Yes No gletered Agent  Cxrov PM  |
| istered Agent   | 81 Name<br>82 Street Add<br>83 City  | 10. Name and Address of New Re   | gletered Agent  Cxrox PM  lef  |
| 607,1508, Florida Statute                             | 82 Street Add  | rnes (P.O. Box Number is Not Acceptable)   | lej  |
| 607,1508, Florida Statute                             | 83<br>84 City  | dress (P.O. Box Number is Not Acceptate  | lej  |
| 607.1508, Florida Statute                             | 83<br>84 City  | <u> </u>   |  |
| 607, 1508, Florida Statute                            | <b>84</b> City   |  |  |
| 607.1508, Florida Statute<br>orida. Such change was a |  |  |  |
| 607.1508, Florida Statute<br>orida. Such change was a | s the above-named cor  |  | FL 85 Zip Code   |
| orida. Such change was a                              |  | reporation submits this statement for the p  |  |
|   | uthorized by the corpora   | ation's board of directors. I hereby accep   | t the appointment as register  |
| יאנ, מפטנטרו פטי, הער<br>יי                           | ilua Stalules.   |  | 4/11/97  |
| ile if applicable. (NOTE                              | Registered Agent signature requ  |  | DATE   |
| ECTORS  | 13.  | ADDITIONS/CHANGES TO OFFIC   |  |
| TI DELETE   |  |  | Change [_] Ad  |
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|   | 6.3 STREET ADDRESS   | :  |  |
|   | 6.4 CITY-ST-ZIP  |  |  |
| this filing does not qualif                           | v for the exemption state  | ed in Section 119.07(3)(i), Florida Statute  | s. I further certify that the  |
|   | This filling does not qualifimental annual report is to receiver or trustee empower. | THE If applicable. (NOTE Registered Apent algorithme requestor CTORS 13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP  DELETE 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 5.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.1 TITLE 6.2 NAME 6.3 CITY-ST-ZIP 1.1 TITLE 6.2 | THE STREET ADDRESS  13. ADDITIONS/CHANGES TO OFFICE  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.5 STREET ADDRESS  3.4 CITY-ST-ZIP  DELETE  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  DELETE  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  DELETE  6.1 TITLE  6.2 NAME  6.3 STREET ADDRESS  5.4 CITY-ST-ZIP  DELETE  6.1 TITLE  6.2 NAME  6.3 STREET ADDRESS  5.4 CITY-ST-ZIP  COLUMN C |