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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

May 02 1997 8:00am

Secretary of State

407 381 9669

DOCUMENT # P96000072860 (5)

GERMAN SPORTS SCIENCE, INC.

Principal Place of Business Mailing Address										
19795 WATERH ORLANDO FL S	OUSE WAY	13735 WA	13735 WATERHOUSE WAY ORLANDO FL 32828-8350							
1 3 							3. Date incorporated or Qualified 08/29/1996	3a. [Date of Last R	eport
2. Principal Pi	ace of Business	2a. Mailin 26	g Address				4. FFI Number 59-3407481			plied For of Applicable
Sulte, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Fee Re	
City & State	3	City 8	State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added	
Zip	Country	Zφ		<u> </u>	untry	· · · · · · · · · · · · · · · · · · ·	8. This corporation has liability for		le tax under s	
24	9. Name and Address of Curr	29	Agont	30	T		Florida Statutes 10. Name and Address of New R		<i></i>	
	······································	ent registered i	Agent		81	Name	IU. Name and Address of New H	egisterec	a Agent	
NOVAK, MIKHAIL LEWIS 13735 WATERHOUSE WAY							- (D \ D \ D \)			
	ANDO FL 32828				82	Street Addr	ess (P.O. Box Number is Not Acceptable)			
					84	City		F		Code
SIGNATURE	egistered agent, or both, in the Sta m familiar with, and accept the obl Signature typed or printed name of repotented						oration submits this statement for the ion's board of directors. I hereby according to the statement of the whom reinstating)		opointment as	registered
12.		ND DIRECTORS		13.		ani signa:çir; requir	ADDITIONS/CHANGES TO OFF	ICERS AN	ND DIRECTOR	RS IN 12
TITLE	D		DELETE	1.17	IILE				Change	Additio
NAME	NOVAK, MIKHAIL LEWIS			1.2 N	AME					
STREET ADDRESS	13735 WATERHOUSE WAY			- 1		ADDRESS				
CITY-ST-ZIP TITLE	ORLANDO FL 32828		DELETE		IIY-S	II · ZIP			Change	Additio
NAME	GREINER, HUGO DR.		LJ DILLIL	211 221		}			Gliange	Additio
STREET ADDRESS	1166 ARBORVISTA DRIVE					ADDRESS				
CITY-ST-ZIP	ATLANTA GA 30329			1		S1-7IP				
TITLE			DELETE	31 I					☐ Change	Additio
NAME				32 N	lami	\ \				
STREET ADDRESS				3.3 \$	TREET	ADORESS				
CITY-ST-ZIP			Tours			\$1-7IP.			00	1 633
TITLE NAME			DELETE	4.11					☐ Change	Additio
STREET ADDRESS				1		ADDRESS				
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NAME				5.2 N	AME					
STREET ADDRESS				5.3 \$	THEET	ADDRESS				
CITY-ST-ZIP	·				11 Y - S	T-21P			- 	-
TITLE			DELETE	6.1 3					Change	Additio
NAME				6.2 N						
STREET ADDRESS					TREEL VIV. C	ADDRESS				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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 control of the