

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

FILED
Apr 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000081261 (5)**

1. Corporation Name

SOCCER RESOURCE GROUP, INC.

Principal Place of Business

**8300 UNIVERSITY PKWY
SARASOTA FL 34270
US**

Mailing Address

**711 CATTLEMEN RD.
SARASOTA FL 34232**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	3603 CLARK ROAD	26	SAME	09/30/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0699646	
City & State		City & State		Applied For	
23 SARASOTA FL		28		Not Applicable	
Zip		Zip		5. Certificate of Status Desired <input type="checkbox"/>	
24 34233		29		\$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25		30		Trust Fund Contribution <input type="checkbox"/>	
				\$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible	
				Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**BROWNING, ROBERT W JR, ESQ
1800 SECOND STREET
SUITE 755
SARASOTA FL 34238**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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

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

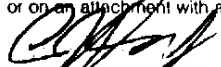
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
NAME	EICHERA, AL	1.2 NAME	EICHERA, AL
STREET ADDRESS	7005 SADDLE CREEK CIRCLE	1.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	
NAME	MENALIES, JOHN	2.2 NAME	
STREET ADDRESS	711 CATTLEMEN RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	
NAME	MORRIS, GORDON	3.2 NAME	
STREET ADDRESS	711 CATTLEMEN RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
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.

SIGNATURE:



4/20/98

911-927-4674

CR2E034 (10/97)