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PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P9700000596 (1)

ULTIMATE SPORTS PRODUCTIONS, INC.

FILED Apr 14 1998 8:00am Secretary of State



April 8 1998

Principal Place of Business Mailing Address 20423 STATE RD 7, SUITE 6234 BOCA RATON FL 33498 20423 STATE RD 7, SUITE 6234 **BOCA RATON FL 33498** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/03/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Žip Country Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FILINGS, INC. 3732 NW 16TH ST 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33311 83 84 City Zip Code 85 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed meno of registered agent and title if applicable CR2E034 (10/97 OFFICERS AND DIRECTORS 12. 13, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE Change 1.1 TITLE WEISMAN, RICHARD B NAME 1.2 NAME 20423 STATE RD 7, SUITE 6234 STREET ADDRESS 1.3 STHEET ADDRESS **BOCA RATON FL 33498** CITY-ST-ZIP 1.4 CITY-\$1-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-\$1-ZIP CITY-ST-ZIP DELETE TITLE Change Addition 3.1 100 F NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE Change 5.1 TOLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-S1-ZIP 6.4 CHY-S1-7(P 14. Thereby 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 attacheron with an address