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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000005417**1. Corporation Name

UNIVERSAL SPORTS & GAMES, INC.

Principal Place of Business	Ma
11083 SPRING HILL DR	110
SPRING HILL FL 34609	SPI

iling Address

983 SPRING HILL DR

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90064 039 ***150.00



SPRING HILL FI	L 34609	SPRING HILL FL 34609			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed		
						01/13/1997		
2. Principal P	lace of Business	2a. Mailing Address			_	4. FEI Number	Ap	plied For
21		26				59-3423751	No	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	8.75	Additional
22		27			_	5. Certificate of Status Desired	Fee Re	equired
City & State	е	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intangi		
24	25	29	30			1 crocker, reporty rain	Yes	□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Age	nt	
1.410	O ANDESTE M			81	Name	•		
	D, ANNETTE M			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
	HOOK DR							
SPRI	ING HILL FL 34608			83				
				84	City	B	5 Zip	Code
					,	┡┖╵	1	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	es, the a	bove	e-named co	rporation submits this statement for the purpose of chartion's board of directors. I hereby accept the appointment	nging its	registered
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligat	ions of, Section 607.0505, Flo	rida Stat	utes.	uie corpora	mons board of directors. Thereby accept the appointment	. K as IC	gistorod
SIGNATURE	. , ,							l
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE	: Registered	Agen	t signature requ	ired when reinstating) DATE		
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND D		
TITLE	PTD	☐ DELETE	1.1 Ti	TLE		L	Change	☐ Addition
NAME	LAIRD, ANNETTE M		1.2 N	WE				
STREET ADDRESS	1078 HOOK DR		1.3 \$1	REET	ADDRESS			
CITY-ST-ZIP	SPRING HILL FL 34608		1.4 C	TY-\$T	r-ZIP			
TITLE	VSD	☐ DELETE	2.1 TI	ΠE			Change	Addition
NAME	LAIRD, BILLY J		2.2 N	AME				
STREET ADDRESS	1078 HOOK DR		2.3 \$	REET	ADORESS			ì
CITY-ST-ZIP	SPRING HILL FL 34608		2.40	ITY-S	T-ZIP			
TITLE		☐ DELETE	3.1 TI	TLE			Change	☐ Addition
NAME			3.2 N	ME				
STREET ADDRESS			3.3 S	REET	ADDRESS			
CITY-ST-ZIP			3.4. C	ITY-S	T-ZIP			
TITLE		☐ DELETE	4.1 TI	TLE			Change	☐ Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 S	REET	ADORESS			
CITY-ST-ZIP			4.4 CI	TY-ST	Γ- ZIP			
TITLE		☐ DELETE	5.1 TI	TLE			Change	☐ Addition
NAME			52 N	AME	j			
STREET ADDRESS			5.3 S	REET	ADDRESS			
CITY-ST-ZIP				TY-ST	r-zip			
TITLE		☐ DELETE	6.1 TI	TLE			Change	☐ Addition
NAME			6.2 N	ME				
STREET ADDRESS	}		6.3 S	TREET	ADORESS			
CITY-ST-ZIP			6.4 C	TY-81	T-ZIP			İ
14 hereby o	entify that the information supplied wit	h this filing does not qualify for	the exe	mpti	on stated in	Section 119.07(3)(i), Florida Statutes. I further certify t	hat 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, with all other like empowered.