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

**PROFIT** CORPORATION **ANNUAL REPORT 19**98



ELORIDA DEPARTMENT OF STATE

Sandra Br Morthagn

Scheretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000010991 (2)

**FILED** Jun 22 1998 8:00am Secretary of State

ALTERNATIVE SPORTS, INC.				
Principal Place of Business	Mailing Address		1 (BB)(BB) ARB FB((BB)(BB)(BB)(AB) BB((AB) BB((AB))(BB)	<u> </u>
923 NORTH GOLF DRIVE	923 NORTH GOLF D	RIVE		
HOLLYWOOD FL 33021	HOLLYWOOD FL 330		DO NOT WRITE IN TA	HC COACE
		1	DO NOT WRITE IN TH  3. Date Incorporated or Qualified	115 SPACE
•			01/31/1997	
2. Principal Place of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For
21	26	•	65-0760399	Not Applicable
Suite, Apt #, etc.	Suite, Apt. #, etc.	······································		\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
23	28	r och og fill de skald has døgende kalende for dette trake. Here och skald fill	Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the	
24    25	[29]	30	Personal Property Tax due June 30.	L Yes L No
9. Name and Address of Curre	ent Hegistered Agent	81 Name	10. Name and Address of New Register	ed Agent
CUNNINGHAM, SEAN M		oi Name		
923 NORTH GOLF DRIVE		82 Street Add	ldress (P.O. Box Number is Not Acceptable)	
HOLLYWOOD FL 33021		83		
		63		
		84 City		85 Zip Code
44.0	100 - 1200 4100 FL 01-			
11. Pursuant to the provisions of Sections 607 05 office or registered agent or both, in the State	ਕਟ and 607.1508, Florida Stat de of Florida: Such change wa	idles, the <b>above</b> -hamed corp is authorized by the corpora	poration submits this statement for the purposition's board of directors. I hereby accept the	e or changing its registered appointment as registered
agent. I and familiar with such accept the obt	galions of, Section 607,0505,	Florida Statutes.	4 1	
SIGNATURE	Sean Can On the database Sea	Ningham Po	esident of	-01-98
12. Signate Appears (Fastering of the research	ND DIRLCTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
THE President	DELETE	1.1 HILE	Applitotopolizades 10 of 10erio	Change Addition
NAME SOCIAL CONTRACTOR	<del>==</del>	1.2 NAME		
STREET ADDRESS 3212 NE 12 th 5	M AND DOG	1.3 STREET ADDRESS		
CITY-SI-ZIP POMPTIO BETTEN.	10 22062	1.4 CHY-ST-ZIP		
TITLE VICE President	DELTE	2.1 TITLE		Change Addition
ALCA LIGHTERAL	44	2.2 NAME		
expect appropriate Carlo 2 Ft 14 Part 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Terr	2.3 STREET ADDRESS		
CITY-ST-211 Charlotte, N.	( 2 <b>0</b> 222	2 4 CHY-ST-ZIP		•
TITLE Secretary	DELETE	3.4 TITLE		Change Addition
NAME Lisa Kelley		3 2 NAME		
STREET ADDRESS 5710 SW SS St.		3 3 STREET ADDRESS		
CITY-ST-ZIF Davie PL 333	.14	\$.4. C(TY-S1-ZIP		
THE Treasurer	☐ DELFTE	4.1 TITLE		Change Addition
	+	4. 2 NAME		// / />
SIREET ADDRESS 923 N. GOLF OC	•	4,3 STREET ADDRESS	ightharpoonup	$n(n \perp 1)$
SIREET ADDRESS 923 N. GOLF OR. CITY-ST-ZIP HOLLY WOOD, PL	337021	4 4 CITY - ST-ZIP		レッンナ
TITLE	DELFTE	5.1 TITLE		☐ Change ☐ Addition
NAME		5 2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
City-St-ziP		5 4 CITY - ST - ZIP		
TITLE	DELETE	6 1 THTLE		Change Addition
NAME		6.2 NAME	<b>900002:5</b> 663 - <b>06</b> 72379801026	904
STREET ADDRESS		6.3 STREET ADDRESS	***156.00	CO I
CITY-ST-ZIP		6.4 CITY - ST- <b>2</b> IP	Coefee 110 07/2/0 Floride Claudes Uturbe	

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. Further certify that the informatio indicated on this annual report or suppliements, annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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 13 if changed, or on an attachment with an address