FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED May 27, 2002 8:00 am Secretary of State 05-27-2002 90431 010 ***150.00

DOCUMENT # P97000011842			05-27-2002 90431 010 ***150.00	
1. Entity Name SOMMER SPORTS, INC				
	· · · · · ·	,		
	CONTRACTOR STATE OF THE STATE O	inania maria kateatana.		
	IN THE CO	ACE .	670841	
DO NOT WRITE		AUE		
2. Principal Place of Business	3. Mailing Address	and the second s		
PO DOX 121236 PO DOX 121236				
Suite, Apt. #, etc. Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State CLERMONT, FL	City & State	NO EL		oplied For
		Country	_ \$9.75 Add	ot Applicable
Zip 34712 Country	zip 34712	introvisces Library	Fee Require	
		Name (7. Name and Address of Current Registered Agent	
DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable)				
IN THIS SP				
		*****	8 Desoro ST	
		City CL	zenont FL zizco	ำแ
8. The above named entity submits this statement for the statement	the purpose of changing its re	gistered office or register	ed agent, or both, in the State of Florida.	
SIGNATURE Signature, typed or printed name of registered agent an	d title if applicable. [NOTE: R	tegistered Agent signature required	when reinstating) DA1E	
9. This corporation is eligible to satisfy its Intangible	ari danyayakili Akidalaya	MHT CANS SHOWN	10. Election Campaign Financing \$5.0	O May Be
Tax filing requirement and elects to do so. (See criterla on back)	Andreide Mayankaribanika	Lecolo SE 1000 - SE Jerupa (612)		to Fees
11. OFFICERS AND D	Broadcount No. 2 3 of Company for 20th 1 Con 1 April 2011			SHIPPIN
NAME FRED SOMMOR		mL.		
STREET ADDRESS 838 DE SOTO S	:	STREET-ADDRESS		
CITY-ST-ZIP CLEENONT F	~ 34711	CITY-ST-ZIR (1)		133
TITLE NAME		JULY STATE OF THE		
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		
TITLE NAME			· Province Control of American	11.00
STREET ADDRESS		STREET ADDRESS 8	DO NOT WRITE	
CITY-ST-ZIP.	r o al masseman.	dristen - 2		ACCURACY
TITLE NAME		NAME	IN THIS SPACE.	
STREET ADDRESS		STREET ADDRESS	7 Page 1	100
CITY-ST-ZIP		COTYLSTEZIP CONTRACTOR		6.0002
TITLE NAME		MAKE SAME BOOK OF THE PARTY.		
STREET ADDRESS		STREET ADDRESS OTTY STEEL	Property of the Control	
CITY-ST-ZIP TITLE		Constitution and Constitution of the Constitut		
NAME				
STREET ADDRESS CITY-SI-ZIP		STREET ADDRESS CITY-ST-ZIP		
13. I hereby certify that the information supplied with the	is filing does not qualify for the	e exemption stated in Seci	tion 119.07(3)(i), Florida Statutes. I further certify that the inf	ormation
indicated on this report or supplemental 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 11 or on an attachment with an address; with all other the empowered.				
attachment with an address, with all other the empi	owered.		[]	j
CICHATURE. NeX	1 1 1 1/1/		4/90/02 352 294-	13200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR