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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000015672 (3)

GRAND SLAM GOLF CARD CO., INC. Mailing Address Principal Place of Business 6801 MIAMI GARDENS DRIVE 8801 MIAMI GARDENS DRIVE MIAMI FL 33015 MIAM! FL 33015 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/19/1997 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country This corporation owes or has paid the current year Intengible Personal Property Tax due June 30. Yes No 29 Yes 24 25 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 100 NOTOWE 9. Name and Address of Current Registered Agent VIDAL, SERGIO 2351 WEST FLAGLER STREET **B2** Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33135** 83 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 Signature, typied or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE TITLE 1.1 TITLE Change ___ Addition VIDAL. SERGIO NAME 1.2 NAME 2351 WEST FLAGLER STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33135** CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE Addition TITLE 2.1 TITLE DIRECTOR. 2.2 NAME 141 ROYAL BIRKDALE DR. Ami, FL 33015 STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE 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-\$1-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change TITLE 5.1 TITUE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby certify that the information supplied with his 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 roport or supplemental alinual roport 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 empsywered 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 a decision of the corporation of the corpor

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

ICMATURE.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

4/27/1998 305829-8456

FILED

May 14 1998 8:00am

Secretary of State

CR2E034 (10/97)

___ Addition