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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

P97000027075 (5)

DOCUMENT # SPORTS MARKETING GROUP, INC.

FILED Jun 01 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address			
35246 U.S. 19 NORTH #268	35246 U.S. 19 NORTH #2	88		
PALM HARBOR FL 34684	PALM HARBOR FL 34684		DO NOT WRITE IN THI	C CDACE
			3. Date Incorporated or Qualified	3 3 FACE
			03/19/1997	
Principal Place of Business	Las Mailing Address		4. FEI Number	I And to d Con
2. Principal Place of Business 21 358 Y6 US 19 N	26. Mailing Address 26. 3572 Y 6 W /	94/	4, FEI NUMBER	Applied For
Sulte, Apt. #, etc.	26 35246 W /1 Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
			5. Certificate of Status Desired	Fee Required
22	27 4 28 8			
	- 28 Palm HARL	BOR, FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip HARBOR, PC	70	Country		Added to Fees
24 3/684 25 USA	34684	an "USA	 This corporation owes or has paid the c Personal Property Tax due June 30. 	Yes No
9, Name and Address of Cui	rrent Benistered Agent	30]	10. Name and Address of New Registere	<u> </u>
	Total Tiogram	81 Name	(O, Mario and Mario of Mario Magnetoro	<u>u rigota</u>
KITCHENER, NEIL				
2090 \$WAN LANE		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
PALM HARBOR FL 34683		83		
		83		
•		84 City		85 Zip Code
•	·		F	
11. Pursuant to the provisions of Sections 607	0502 and 607.1508, Florida Statute:	s, the above-named cor	poration submits this statement for the purpose	of changing its registered
agent. I am familiar with, and accounting	hige Zus of Section 607.0505 Flor	rida Statutes.	alion's board of directors. I hereby accept the a	ppolitiment as registered
SIGNATURE Very Kirly	chenes Nei	1 Kitchen	4F	29 /98
Signature Typed or posted name of registers		Registered Agent & gnature req.		
12. OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE PASIGENT,	☐ DELETE	1.1 TALE		Change Addition
NAME WALL KITCHEREN STREET ADDRESS 2090 SWAN LA		1.2 NAME		
STREET ADDRESS 2090 SWAN LA	NE	1.3 STREET ADDRESS		
CITY-ST-ZIP PALM HARBOR FL	34683	1.4 CITY - ST - ZIP		
HILE	DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CiTY-\$T-ZIP		2 4 C(TY-ST-ZIP		
TITLE	☐ DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME		3 2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-SI-ZIP		3.4. CITY-ST-ZIP		
THLE	☐ DELETE	4.1 TITLE		Change Addition
NAME	bear of	4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
TITLE	□ nere te			Onange Modition
NAME		5 2 NAME		V 1.
STREET ADDRESS		5.3 STREET ADDRESS		الم) ك
CITY-ST-ZIP		5.4 CITY - ST - ZIP		<u> </u>
TITLE	DELETE	. 6.1 TITL€	ومناو وساو والمار والمار والمار والمار والمار والمار والمار والمار والمار	Change Addition
NAME		6.2 NAME	8000025436	
STREET ADDRESS		6.3 STREET ADDRESS	-06/02/98010200	J30
CITY-ST-ZIP		6.4 CITY - ST - ZIP	***150.00	

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 altrachment with an address.