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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000041289 (4)

U.S.A. SPORTS & GOODS, INC.

FILED Jan 28 1998 8:00am Secretary of State



01/02/98

Principal Place of Business	Mailing Address		
·	_	- Kine	
5750 MAJOR BLVO SUITE 275- ORLANDO-PL 32818	5750 MAJOR DLVD SUIFE ORLANDO FL 32819	E 2/5	
			DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified 05/09/1997
2. Principal Place of Business	2a. Mailing Address	A 1307 A 11 A	4. FEI Number Applied For
21 43 16 INTERNATIONAL		TRIVATIONIA	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	Oity & State		Election Campaign Financing \$5.00 May Be
23 URUANDO FC	28 URLANDO		Trust Fund Contribution Added to Fees
Zip Country 25 25 24 3分 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Zip 34.819	Country	8. This corporation owes or has paid the current year Intangible
24 302 3 1 25 9. Name and Address of C		30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
SOUZA, ANTONIO		81 Name	10, Name and Address of New Negletoles Agent
5750 MAJOR BLVD SUITE 27	E		
ORLANDO FL 32819	5	82 Street Ad	ddress (P.O. Box Number is Not Acceptable)
ORDANDO FL 32018		83	
$A \cap A$		84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 60	07.0502 and 607.1508 Florida Statute	s the above-named c	
office or registered agent, or both, in the	State of Florida. Such change was at	uthorized by the corpo	orporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	obligations of, Section 607,0505, Flor	ioa Statutes.	01/23/98
SIGNATURE Signature, the of printed name of rigister	ared agent and title if applicable (NOTE:	Registered Agent signature re	
12. OFFICER	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD	☐ DELETE	11 TITLE	Change Addition
NAME SOUZA, ANTONIO		1.2 NAME	SOUZA, ANTONIO SOUZA, ANTONIO SOUZA, ANTONIO SOUZA, ANTONIO SOUZA, ANTONIO SOUZA, ANTONIO SOUZA, ANTONIO SOUZA, ANTONIO SOUZA, ANTONIO
STREET ADDRESS 5750 MAJOR BLVD SUF	TÉ 275	1.3 STREET ADDRESS	STED MAJDE BLUD SUITE OF FE
CITY-ST-ZIP ORLANDO FL 32819		1.4 CITY - ST - ZIP	DRLANDO FL 32819
TITLE DS-	DELETE	2.1 TITLE]	5. Change Addition
NAME DE PAULA FRANCISCO	LM-JR	2.2 NAME <u>T</u>	DE PAULA, FRANCISCO MJR
ATTENDESS 8750 MAJOR BLYD BUT	TE 275	2.3 STREET ADDRESS	7316INTERNATIONAL DR
CHY-SI-ZIP ORLANDO PE 32819		2. 4 CITY-ST-ZIP	DRLANDO FL 32819
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP	T ociete	3.4. CITY-ST-ZIP	F-1
TITLE	☐ DELETÉ	4.1 TITLE	Change Addition
NAME		4. 2 NAME	•
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	DELETE	4.4 City - St - ZiP 5.1 Title	Chance Living
NAME	□ becei€		☐ Change ☐ Addition
STREET ADDRESS		5.2 NAME 5.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	C Change C Addition
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP	\sim)	6.4 CITY - ST - ZIP	
14. I hereby certify that the information suppl	ied 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 supplier	mental annual report is true and accur	rate and that my signa	ature shall have the same legal effect as if made under oath; that I am an
Block 12 or Block 13 if changed or on an	n attachmen with an address.	recote this report as re	ature shall have the same legal effect as if made under oath; that if am an equired by Chapter 607, Florida Statutes; and that my name appears in