

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVE). MINIMUM AMOUNT DUE TO REINSTATE: \$750.

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000041637

1. Corporation Name

TOTAL ENTERTAINER AND ATHLETE MANAGEMENT, INC.

Principal Place of Business

3136 VIRGINIA STREET
COCONUT GROVE FL 33133

Mailing Address

3136 VIRGINIA STREET
COCONUT GROVE FL 33133

FILED

99 NOV 19 PM 12:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01/25/99 90002009

DO NOT WRITE IN THIS SPACE \$5500

3. Date Incorporated or Qualified

05/09/1997

4. FEI Number

65-0751502

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CANTER, DAVID
3136 VIRGINIA STREET
COCONUT GROVE FL 33133

10. Name and Address of New Registered Agent

81 Name Newman, Richard
82 Street Address (P.O. Box Number is Not Acceptable)
100 West Cypress Creek Road
83 5th Floor
84 City Fort Lauderdale, FL
85 Zip Code 33309

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	CANTER, DAVID	3136 VIRGINIA STREET	COCONUT GROVE FL 33133	<input type="checkbox"/>
S	HOCHBERG, BRUCE	3949 COCOPLUM CIRCLE	COCONUT CREEK FL 33063	<input type="checkbox"/>
Chairman of the Board	Newman, Richard	2315 NW 24th Court	Boca Raton, FL 33434	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I hereby 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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

01/27/99

954-771-3606

TOTAL ENTERTAINER AND ATHLETE MANAGEMENT

100 West Cypress Creek Road, 5th floor, Fort Lauderdale, FL 33309
tel 800-478-9811 / 954-202-2091 fax 954-771-0891 www.team.com

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October 19, 1999

State of Florida
Secretary of State
Division of Corporations
P.O. box 6327
Tallahassee, FL 32314

RE: Total Entertainer & Athlete Management, Inc.
P97000041637
1999 Annual Report

Dear Sirs,

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I am in receipt of your notice for Administrative Dissolution or Revocation. Please be advised that the annual report was filed on August 16, 1999 of which a copy of which is enclosed in this correspondence. Additionally, please find enclosed a copy of the cancelled check number 2040 evidencing the payment of \$550 on August 16, 1999.

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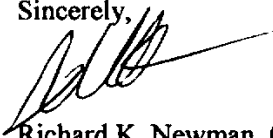
Accordingly, all cooperate reports were timely filed. Please abate any further requirements for Total Entertainer and Athlete Management, Inc. for the year 1999 as we have complied with the filing requirements of the State of Florida.

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Should you have any questions concerning this matter, please feel free to contact the undersigned.

Sincerely,



Richard K. Newman, CPA
Chairman of the Board

enclosures