

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0064790

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P97000052294 (0)**

1. Corporation Name

SPORTS MARKETING CONSULTANTS, INC.

Principal Place of Business

**7820 BANYAN TERRACE
TAMARAC FL 33321**

Mailing Address

**7820 BANYAN TERRACE
TAMARAC FL 33321**

2. Principal Place of Business

21 **8400 NO. UNIVERSITY DR.**

Suite, Apt. #, etc.

22 **213**

City & State

23 **TAMARAC FL**

Zip

24 **33321**

Country

25 **USA**

2a. Mailing Address

26 **8400 NO. UNIVERSITY DR.**

Suite, Apt. #, etc.

27 **213**

City & State

28 **TAMARAC, FL**

Zip

29 **33321**

Country

30 **USA**

9. Name and Address of Current Registered Agent

**JAFFE, ROBERT
7820 BANYAN TERRACE
TAMARAC FL 33321**

3. Date Incorporated or Qualified

06/12/1997

4. FEI Number

65-0770671

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

300002658243--4

82 Street Address (P.O. Box Number is Not Applicable)

1800798--01096--006

83

84 City

FL

85 Zip Code

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 the business of the corporation and its affairs.

SIGNATURE **Robert Jaffe**

Signature, typed or printed name of Registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9/24/98

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **JAFFE, ROBERT**
STREET ADDRESS **7820 BANYAN TERRACE**
CITY-ST-ZIP **TAMARAC FL 33321**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PRESIDENT** ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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

Robert Jaffe

9/23/98 954-724-5917

CR2E034 (5/98)

FILED

98 OCT -2 PM 12:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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