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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

NAME STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 08 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700063675 (7)

MJM SPORTS MARKETING, INC.

7570-90 COMERCE CT. SARASOTA FL 34243		7570-90 COMERCE CT. SARASOTA FL 34243				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/23/1997
2. Principal P	2a. Mailing Addre	Address			4. FEI Number Applied For	
21	add or addinose	26				4. FEI Number 65-0783464 Applied For Not Applied be
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				SR 75 Additional
22	•	27				5. Certificate of Status Desired Fee Required
City & Stat	9	City & State	i			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Z ip	Country	Zip	Co	untry		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Yes No
Name and Address of Current Registered Agent					,	10. Name and Address of New Registered Agent
ICARD,MERRILL,CULLIS,TIMM,FUREN&GINSBURG				81	Name	me
20	33 MAIN ST., STE. 600			82	Street	eet Address (P.O. Box Number is Not Acceptable)
SA	RASOTA FL 34237			54 54 54		
				83		
				84	City	y B5 Zip Code
						red 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. Thereby 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 tallor if spiriticable. (NOTE: Registered Agent signature required whom reinstating) DATE						
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DE	ILETE 1.13	ITLE		☐ Change ☐ Addition
NAME	BERGER, DAVID W		1,27	1.2 NAME		
STREET ADDRESS	1310 HILLVIEW DR.		1.3 9	STREET	ADDRESS	SS
CITY-ST-ZIP				CITY - S	T - ZIP	
TITLE	D			2.1 TITLE		Change Addition
NAME			2.2 NAME			
STREET ADDRESS 49 VALLEY RD.			2.3 5		ADDRESS	ESS
CITY-ST-ZIP					ST-ZIP	
TITLE			TITLE		☐ Change ☐ Addition	
NAME			3.21	MAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP					ST - ZIP	
TITLE		D€				Change Addition
NAME				NAME		
STREET ADDRESS					ADDRESS	SSS
CITY-ST-ZIP			4.4 C/TY - ST - Z/P 5.1 TITLE		Change Addition	
TITLE		□ DE				Citalings (1) Adollion
NAME				MAME		
STREET ADDRESS					ADDRESS	iss
CITY-ST-ZIP		DE	5.4 CITY-ST-ZIP 6.1 TITLE		T-ZIP	Change Addition
TITLE	I	I_J D		1111		LI CHANGE LI MOUIION

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.