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Oct 07 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000064972 (7)

1. Corporation Name

ROUND MAN GOLF ENTERPRISES, INC.

Principal Place of Business

2801 PONCE DE LEON BLVD. STE. 1100  
CORAL GABLES FL 33134

Mailing Address

2801 PONCE DE LEON BLVD. STE. 1100  
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 9140 NW 96th Street		26 9140 NW 96th Street		07/28/1997	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	
23 City & State MEDLEY FLORIDA		28 City & State MEDLEY FLORIDA		65-0770737	
24 Zip 33178		29 Zip 33178		Country United States	
25 Country DAGE		30 Country United States		5. Certificate of Status Desired X	
26		31		8.75 Additional Fee Required	
27		32		6. Election Campaign Financing	
28		33		Trust Fund Contribution	
29		34		5.00 May Be Added to Fees	
30		35		8. This corporation owes or has paid the current year Intangible	
31		36		Personal Property Tax due June 30. Yes No	

9. Name and Address of Current Registered Agent

CARLSON, SHARON  
2801 PONCE DE LEON BLVD. STE. 1100  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name	SHEILA SMITH
82 Street Address (P.O. Box Number is Not Acceptable)	3080 SW 129th Avenue
83	
84 City	MIAMI
85 Zip Code	FL 33175

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 file if applicable

SHEILA SMITH DIRECTOR

DATE

6-30-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	SMITH, ALAN W	1.2 NAME	
STREET ADDRESS	3080 S.W. 129TH AVENUE	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33175	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	
NAME	SMITH, SHEILA	2.2 NAME	
STREET ADDRESS	3080 S.W. 129TH AVENUE	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33175	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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

SHEILA SMITH 6-30-98 305 881-0511

CR2E034 (10/97)