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

FILED Feb 17 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P97000081897 (5) ATP SPORTS, INC. Principal Place of Business Mailing Address 200 S BISCYANE BLVD 200 S BISCYAME BLVD SHITE 4900 SHITE 4900 DO NOT WRITE IN THIS SPACE MIAMI FL 33131 MIAMI FL 33131 3. Date Incorporated or Qualified 09/22/1997 2. Principal Place of Business 2a. Mailing Address Applied For 4708 SU 671 Me. 4708 SW 6711, Ave -0782105 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be 6. Election Campalgn Financing Trust Fund Contribution Added to Fees 28 Country USA 8. This corporation owes or has paid the current year Intangible Yes Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent A1 Name DIBELLO, DARIN A 200 S BISCYANE BLVD 62 Street Address (P.O. Box Number is Not Acceptable) **SUITE 4900** 83 **MIAMI FL 33131** 84 City 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, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed harne of registered agent and title 4 applicable (NOTE: Registered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Addition TITLE 1.1 TITLE Change DIBELLO, DARIN A 1.2 NAME CR2E034 NAME 200 S BISCYANE BLVD STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33131 CITY-ST-ZIP 1.4 CITY - ST-ZIP Addition TITLE DELETE 21 TITLE Change 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP Addition DELETE Change TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME

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

53 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME

DELETE

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment with an address

2/6/98

305-669-4786

Change

Addition