

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000017714

1. Entity Name

SPORT SHOT PHOTOGRAPHIC, INC.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90083 027 ***150.00

Principal Place of Business

8148 CAMERON CAY COURT
NEW PORT RICHEY FL 34653

Mailing Address

8148 CAMERON CAY COURT
NEW PORT RICHEY FL 34653-1511

2. Principal Place of Business

7088 MARINER BLVD

Suite, Apt. #, etc.

3. Mailing Address

7088 MARINER BLVD

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

SPRING HILL, FL

City & State

SPRING HILL, FL

4. FEI Number

59-3497694

Applied For

Not Applicable

Zip

34609

Country

USA

Zip

34609

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BIERWEILER, RAYMOND H
9039 LITTLE ROAD
NEW PORT RICHEY FL 34654

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D
STREET ADDRESS SBANI, THOMAS F
CITY-ST-ZIP 8148 CAMERON CAY COURT
NEW PORT RICHEY FL 34653

TITLE ☐ Delete
NAME D
STREET ADDRESS SBANI, JEAN M
CITY-ST-ZIP 8148 CAMERON CAY COURT
NEW PORT RICHEY FL 34653

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

THOMAS F. SBANI

THOMAS F. SBANI - PRESIDENT

Date

5/1/00

Daytime Phone #

352-596-
4313

CR2E034 (9/99)