

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$700).

07-23-1999 90001 047 ***150.00
P98000021915

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000021915

1. Corporation Name
E - Z SPORT GRIP COMPANY

Principal Place of Business
13654 SECOND AVE., N.E.
BRADENTON FL 34202

Mailing Address
13654 SECOND AVE., N.E.
BRADENTON FL 34202

FILED

99 AUG -4 PM 3: 59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/06/1998

4. FEI Number
65-0819855

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

7. This corporation owes the current year
Intangible Personal Property. ☒ Yes ☐ No

2. Principal Place of Business
21 2073 Porter Lake Dr.

Suite, Apt. #, etc.
22 Unit D

City & State
23 Sarasota, FL

Zip
24 34240

2a. Mailing Address
25 Same

Suite, Apt. #, etc.
27

City & State
28

Zip
29

8. Name and Address of Current Registered Agent

BRUCE, W. MARK
13654 SECOND AVE., N.E.
BRADENTON FL 34202

10. Name and Address of New Registered Agent

81 Name Bruce, W. Mark
82 Street Address (P.O. Box Number is Not Acceptable)
2577 Glebe Farm Close
83
84 City Sarasota, FL
85 Zip Code 34235

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 _____ DATE _____
(Signature, typed or printed name of registered agent and file if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE D
NAME BRUCE, WILLIAM F
STREET ADDRESS 4332 CAMINO MADERA
CITY-ST-ZIP SARASOTA FL 34238

TITLE D
NAME BRUCE, MARLO M
STREET ADDRESS 13654 2ND AVE. NE
CITY-ST-ZIP BRADENTON FL 34202

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME Bruce, William F.
1.3 STREET ADDRESS 2073 Porter Lake Dr. Unit D
1.4 CITY-ST-ZIP Sarasota, FL 34240

2.1 TITLE
2.2 NAME Bruce, Marlo M.
2.3 STREET ADDRESS 2577 Glebe Farm Close
2.4 CITY-ST-ZIP Sarasota, FL 34235

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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: William M. Bruce 7/15/99 944-328-5305
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0001367

CR2E034 (5/99)



998-21915

E-Z SPORT GRIP. CO.
2073 Porter Lake Drive, Unit D
Sarasota, FL 34240
Phone (941) 378-5309
Fax (941) 378-5219
Toll Free 800-819-0072

July 13, 1999

Annual Reports Filings
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

We are writing to you concerning the 2nd notice for the Profit Corporation Annual Report we received the week of July 10, 1999. Attached you will find a copy of the forwarded mailing label. As you see there was a forwarding address on file with the Post Office. However, we did not receive the 1st Annual Report. We have mailed a check to the state in the amount of \$150 along with the form which includes an address correction.

Please understand there was no intent on the Company's part to mislead or defraud the State of Florida. But, during the confusion of relocating we overlooked the fact that we had not received the Annual Report Notice. Also, this penalty would create a severe financial hardship on our company. Therefore, I am asking at this time to please wave the \$400 fee due to the above explanation.

If you should have any questions, please contact me at the number listed .

Sincerely,

A handwritten signature in black ink, appearing to read "Mark Bruce", with a stylized flourish at the end.

Mark Bruce



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

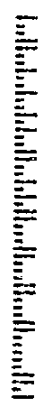
DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314



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BRUC654*

TO: 0101397 AF **AUTO T8 1 1297 34202-272554 P98000021915
E - Z SPORT GRIP COMPANY
13654 SECOND AVE., N.E.
BRADENTON FL 34202-2725

BRUC654 342021009 1399 18 07/02/99
NOTIFY SENDER OF NEW ADDRESS
BRUCE
2577 GLEBE FARM CLOSE
SARASOTA FL 34235



PRESORTED
FIRST-CLASS MAIL
U.S. POSTAGE PAID
FLORIDA DIVISION OF CORPORATIONS
#4071