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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9800040895

1. Corporation Name

ART SPORT PRODUCTIONS, INC.

Principal Place of Business	Mailing Address			# 1051001 170 18401 1944 10141 00141 00141 0141 0141 014				
22277 SW 66 AVE STE 1904 BOCA RATON FL 33428	22277 SW 66 AVE STE 1904 BOCA RATON FL 33428			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 05/06/1998				
2. Principal Place of Business 21 8800 Boca RWDEIVE Suite, Apt #, etc. 22	2a Mailing Address 26 8300 BOCA Q10 Suite Apt #, etc	BRI	VE	4. FET Number 65-0842088 5. Certificate of Status Desired \$8.75 Additional Fee Required				
Crix & State Boca Raton, Florida Zip Country	28 BOCO Roton,	Fla	orida	6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes the current year Intengible				
24 33 433 [25] 9. Name and Address of Curr	29 33433 [30]	1		Personal Property Tax [1 Yes IV.No. 10. Name and Address of New Registered Agent				
	ent registered Agent	81	Name	10. Name and Address of New Magnetics Figure				
AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES FL 33134		82 83						
		84	City	F1 85 Zip Code				

ACE Applied For Not Applicable 8.75 Additional Fee Required

FILED

99 MAR 23 PM 12: 03

SECRETARY OF STATE TALLAHASSEE, FLORID/

10.	N	ame a	nd Ac	ldres	s of N	lew f	₹egis	ter	ed Ag	ent					
s (F	2.0	Box I	Numbi	er is N	lot Ac	ccepta	able)			-		-			

12. OFFICERS AND E	DIRECTORS	13.	ADDITIONS/CHANGES TO	OFFICERS AND DIBECTORS IN
TITLE PD	[DELETE	1 1 TITLE	V	[Mchange [1]
IAME GIORGIO, ALLISON		12 NAME	florgio, Allison 1800 Boca Rio Briu	
STREET ADDRESS 22277 SW 66 AVE		13.51REETACORESS	9300 BOCA RID DRIV	E BOCO Reton FC 336
BOCA RATON FL 33428		1.4 CUV.SL.202		, , , , , , ,
ITLE STD	E) belete	2 1 THTLF	P/T/S_	Change []
NAME GIORGIO, TROY		2.2 NAME	Siorgio, Troy 8300 Boca Rio DE	
STREET ADDRESS 22277 SW 66 AVE		2.3 STREET ADDRESS	8300 BOCA RIO DE	ive Bixa. Reton Ft 331
CITY-ST-ZIP BOCA RATON FL 33428		2 4 CITY-S1 ZIP		
TITLE VD	[Y DELETE	3 1 THLF		[] Change []
NAME PRISKIE, JEFFREY		3.2 NAME	and the same of th	7 581 8589 72589 - 87879 - 024
STREET ADDRESS 22277 SW 66 AVE		335THEET ADDRESS	-115	7257990107902°
CITY-ST-ZIP BOCA RATON FL 33428		34 City-\$1-7iP	***	**158.75 ****158.
TITLE	[] DELETE	41101.6		[Change []
NAME		4 2 NAM		
STREET ADDRESS		4.3 STHEET ADDRESS		
CITY-St-ZIP		4.4 CITY-ST-ZIF		
TITLE	[] DELFTE	5 1 Title		[Change []
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-2IP		5.4 CITY-ST-26-		CM-2
TITLE	[] DELETE	611016		[] Change
NAME		6.2 NAME		•
STREET ADORESS		6 3 STREET ADDRESS		
CITY-ST-ZIP		64 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 suppliemental 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, with all other like empowered.

SIGNATURE:

3-19-99 561-477-7474