## FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 02, 2002 8:00 am Secretary of State DOCUMENT # P98000041681 1. Entity Name THE ATHLETE, INC. 05-02-2002 90074 002 \*\*\*150.00 Principal Place of Business Mailing Address 3721 NORTH 53RD AVENUE 3721 NORTH 53RD AVENUE HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 Suite DO NOT WRITE IN THIS SPACE 4. FE! Number Applied For 65-0834648 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SMITH, STEVE 3721 NORTH 53RD AVENUE HOLLYWOOD FL 33021 8. The above named ourpose of changing its registered office or registered agent, or both, in the State of Florida. bmits this SIGNATURE ed Agent signature required when reinstating? 9. This corporation is eligible to salisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State Added to Fees OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ... Delete TITLE CR2E034 (9/01) ☐ Addition NAME SMITH, STEVE NAME STREET ADDRESS 3721 N 53RD AVE STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33024 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Chance ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME

13. Under 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 of supplemental report of 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 of the receiver of trustee effective to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes and that my name appears in Block 11 or Block 12 if the statute of the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of trustee effects and the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of trustee effects and the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of trustee effects and the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of trustee effects and the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of trustee effects and the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if mad

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/08/03

954 483 880 Daytime Phone #