

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 # P98000084382

1. Corporation Name

LEGENDS OF THE GAME SPORTSWEAR, INC.

Principal Place of Business

3333 WEST COMMERCIAL BOULEVARD STE. 203
FORT LAUDERDALE FL 33309

Mailing Address

3333 WEST COMMERCIAL BOULEVARD STE. 203
FORT LAUDERDALE FL 33309

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90147 014 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/30/1998

4. FEI Number

☒ 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

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

2. Principal Place of Business

21 102 ESSEX ROAD

2a. Mailing Address

26 102 ESSEX ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 HOLLYWOOD, FLA.

City & State

28 HOLLYWOOD, FLA.

Zip

24 33024 25 U.S.A.

Zip

29 33024 30 U.S.A.

9. Name and Address of Current Registered Agent

ANDZEL, RICHARD M
3333 WEST COMMERCIAL BOULEVARD STE. 203
FORT LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name PETER DELGIORNO

82 Street Address (P.O. Box Number is Not Acceptable)
102 ESSEX ROAD

83

84 City HOLLYWOOD

FL

85 Zip Code 33024

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 *Peter DelGiorno* PETER DELGIORNO
Signature, typed or printed name of registered agent and title if applicable.

SECRETARY, TREASURER
VICE PRESIDENT

4/29/99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME DELGIORNO, SHARON
STREET ADDRESS 3333 WEST COMMERCIAL BOULEVARD STE. 203
CITY-ST-ZIP FORT LAUDERDALE FL 33309

TITLE D ☒ DELETE
NAME MARTIN, JUDIE S
STREET ADDRESS 3333 WEST COMMERCIAL BOULEVARD STE. 203
CITY-ST-ZIP FORT LAUDERDALE FL 33309

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT P D ☒ Change ☐ Addition
1.2 NAME SHARON DELGIORNO
1.3 STREET ADDRESS 102 ESSEX ROAD
1.4 CITY-ST-ZIP HOLLYWOOD, FLORIDA 33024

2.1 TITLE VICE PRESIDENT D VST ☐ Change ☒ Addition
2.2 NAME PETER DELGIORNO
2.3 STREET ADDRESS 102 ESSEX ROAD
2.4 CITY-ST-ZIP HOLLYWOOD, FLORIDA 33024

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

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

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

6.1 TITLE ☐ Change ☐ Addition
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 my address, with all other like empowered.

SIGNATURE:

Peter DelGiorno PETER DELGIORNO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/99

954-486-0424

Date

Daytime Phone #

CR2E034 (11/98)