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 # P98000085723

AMERICAN SPORTS RESEARCH CORP.

Principal Place of Business	Mailing Address			
6122 E. LYNN STREET INVERNESS FL 34452	6122 E. LYNN STREET INVERNESS FL 34452		DO NOT-WRITE IN	•THIS.SPACE
		•	3. Date Incorporated or Qualifed 10/02/1998	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 6135 W. MAIN STREET	26 6135 W, MA	N STREET	59-3537295	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 SuiTE # 124	27 SUITE # 12	4	5. Certifcate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 INVERNESS, FL	28 INJERNESS	, FL	Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current ye	ear Intangible
24 34450 25 US	29 34450 30	4.5	Personal Property Tax.	☐ Yes
9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Regist	tered Agent
BINNING, D. RYERSON 6122 E. LYNN STREET		82 Street Addres	7250 N BINNING SS (P.O. Box Number is Not Acceptable) TERI GAN SPORTS RESETAR	CH (ORP
INVERNESS FL 34452		03		
•			W. MAIN STREET, S	SUITE # 124
		84 City	enESS .	FL 85 Zip Code 3 4450
44 Discount to the provisions of Sections 607 050	2 and 607 1609 Florida Statutes	the above named cornor	ration submits this statement for the ourpr	ose of changing its registered
Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligations.	of Florida. Such change was auth tions of, Section 607.0505, Florida	orized by the corporation Statutes.	i's board of directors. I hereby accept the	appointment as registered
SIGNATURE D. RYERSON BINN	146	Rusa &	· · · · · · · · · · · · · · · · · · ·	2-26-99
Signature, typed or printed name or registered ager	t and due if applicable. (NOTE, No	gistered Agent signature required	ADDITIONS/CHANGES TO OFFICE	
	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition
TITLE PRESIDENT		1.1 TITLE		Civariae Civariae.
NAME O RYERSON BINNI	06	1.2 NAME		
STREET ADDRESS 40 AMERICAN SPORTS		1.3 STREET ADDRESS		
CITY-ST-ZIP 1635 W. MAIN 5T #12	4 INVERZNESS, EL	1.4 CITY-ST-ZIP		Change Addition
TITLE	☐ DELETE	2.1 TITLE		Change D Addition
NAME		2.2 NAME		1
STREET ADDRESS		2.3 STREET ADDRESS		†
CITY-ST-ZIP		2. 4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
\$TREET ADDRESS		3.3 STREET ADDRESS		j
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		Change Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS .		53 STREET ADDRESS		
CITY-ST-ZIP	- (5.4 CITY-ST-ZIP	·	
TITLE	, DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		İ
STREET ANDRESS	_	6.3 STREET ADDRESS		ł

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIG	NΔ	TH	RF.
-			

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90015 030 ***150.00