

**FILED**  
**May 21, 2002 8:00 am**  
**Secretary of State**

05-21-2002 91147 032 \*\*\*150.00

**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000106155

1. Entity Name

**SPORTING PROPERTIES, INC.**

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**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**3007 HERON PLACE**

Suite, Apt. #, etc.

3. Mailing Address

**700 S. FEDERAL HWY**

Suite, Apt. #, etc.

**SUITE 200**

DO NOT WRITE IN THIS SPACE

City & State

**CLEARWATER FL**

City & State

**BOCA RATON FL**

4. FEI Number

**65-0886366**

Applied For

Not Applicable

Zip

**33762**

Country

Zip

**33432**

Country

5. Certificate of Status Desired

**\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name

**STEVEN GARELLEK**

Street Address (P.O. Box Number is Not Acceptable)

**700 S. FEDERAL HWY**

**SUITE 200**

City

**BOCA RATON**

FL

Zip Code  
**33432**

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PST EDWARD MARTENFELD 86 GUIDED COURT #23 ETOBICOKE ON CANADA M9V 4K6</b>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *E. Martenfeld*

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

**E. MARTENFELD**

*APR 30/02*

*727-546-4447*

11/99

Display Phone #

CFR2E034B (1/2001)