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Feb 25, 1999 8:00 am
Secretary of State

02-25-1999 90070 034 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000107558

1. Corporation Name
NATIONAL SPORTS FANS UNION, INC.

Principal Place of Business	Mailing Address
9812 SW 92ND TERR MIAMI FL 33176	9812 SW 92ND TERR MIAMI FL 33176

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 12/28/1998	4. FEI Number 65-0884486	Applied For ☐ Not Applicable
21	26	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	27	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
22	27	28	7. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No	
City & State	City & State	29		
23	28	30		
Zip	Country	Country		
24	25	30		

9. Name and Address of Current Registered Agent

BENSON, JOEL
9812 SW 92ND TERR
MIAMI FL 33176

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	JOEL BENSON	1.2 NAME	
STREET ADDRESS	9812 SW 92ND TERR	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 33176	1.4 CITY-ST-ZIP	
TITLE	VP/SEC/TREAS ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	STEVE GOLDSTEIN	2.2 NAME	
STREET ADDRESS	100 WELLS STREET #912	2.3 STREET ADDRESS	
CITY-ST-ZIP	HARTFORD, CT 06103	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
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		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOEL BENSON

Date

Daytime Phone #

1/22/99 305 281-0040

CR2E034 (11/98)