

2003  
2000

## UNIFORM BUSINESS REPORT (UBR)

FILED  
May 05, 2003 8:00 am  
Secretary of State

05-05-2003 90125 037 \*\*\*150.00

DOCUMENT # P99000023815

1. Entity Name

MATT-WEX SPORTS, INC.

Principal Place of Business:

1631 12TH FAIRWAY  
WELLINGTON FL 33414

Mailing Address:

1631 12TH FAIRWAY  
WELLINGTON FL 33414

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEXLER, DINA  
1631 12TH FAIRWAY  
WELLINGTON FL 33414

Name

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

City

FL

Zip Code

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

DATE Registered Agent signature required when reinstating

DATE

9. This corporation is eligible to satisfy its biennial  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐FILL-NOW!!! FEE IS \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D WEXLER, DINA 1631 12TH FAIRWAY WELLINGTON FL 33414	<input type="checkbox"/>		
D MATTES, GEORGE 1631 12TH FAIRWAY WELLINGTON FL 33414	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		

13. 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 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 clerk empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with true address, with all other like empowerment.

SIGNATURE:

George Mattes George Mattes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-03

Date

561-793-9237

Daytime Phone #