FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

May 15 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # S36685 (3)FINE SPORTS, INC. Principal Place of Business Mailing Address 10621 SW 88 ST 10621 SW 88 ST SUITE 212 DO NOT WRITE IN THIS SPACE MIAMI FL 33176 MIAM! FL 33176 3. Date Incorporated or Qualified 03/06/1991 2. Principal Place of Business 2a. Mailing Address Applied For 59-3058129 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KHEMLANI, VASHI K. 10621 SW 88ST 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 212** 83 **MIAMI FL 33176** 84 City 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 registrated agent and title if apply ablo (NOTE Registered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change Addition TITLE KHEMLANI, VASHI K. 1.2 NAME NAME STREET ADDRESS 10621 SW 88 ST. STE 212 1.3 STREET ADDRESS MIAMI FL CITY-ST-7IP 1.4 City - ST - ZiP DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3 1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP DELETE Change Addition 41 TITLE TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIF ☐ Change DELFTE Addition 5 1 TITLE TITLE 5.2 NAME NAME STREET ADORESS 5.3 STREET ADORESS CITY-ST-ZIP 54 CITY - ST - ZIP Change Addition DELETE 61 TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZIP

14. Thereby 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 eath; 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 on an attachment with an address.

arly V. They OFFICER ON DIRECTOR

SIGNATURE:

FILED