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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 06 1998 8:00am Secretary of State

	1990	DIVISIONO	CONFORMIONO		
1. Corporation	MENT # S5208 SPORTS ENTERPRISES IN	` '			
Delegional Disease	of Dusiness	Admitted Andreas			
Principal Place		Mailing Address			
1370 SE 3RD TERRACE DEERFIELD BEACH FL 33441 US		1370 SE 3RD TERRACE DEERFIELD BEACH FL 33441 US		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
- 6				05/10/1991	
	ace of Business	2a. Mailing Address		4. FEI Number Applied For	
Suite, Apt.	# etc	Suite, Apt. #, etc.		65-0266205 Not Applica	
22	# ₁ 0.10.	27		5. Certificate of Status Desired Fee Required	
City & State	9	City & State		6. Election Campaign Financing \$5.00 May Be	
23		28		Trust Fund Contribution Added to Fees	
Zip	Country	Zφ	Country	8. This corporation owes or has paid the current year Intangible	
24	25	29	30	Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registered Agent	
	NALD DOMINO		a i Name		
6100 NW 60 AVE			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
PAF	RKLAND FL 33067		83		
				·	
			84 City	FI 85 Zip Code	
11. Pursuant t	to the provisions of Sections 607.05	02 and 607 1508. Florida Statut	les, the above-named corp		ed
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.					
	The man with and accept the cont	janons or, section our cood, i ic	onda Giardios.		
SIGNATURE	Signature, typed or printed name of registered ag	post and little if applicable (NOT	E. Registered Agent signature require	ed when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE	Change Addi	ion
NAME	DOMINO, DONALD		1.2 NAME		
STREET ADDRESS	6100 NW 60 AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PARKLAND FL	Dougt	1.4 CITY - ST - ZIP		ai a m
TITLE	VP	☐ DELETE	2.1 TITLE	L Change {] Addii	aon
NAME OXOCCZ ADDOCCO	DENISE DOMINO 6100 NW 60 AVE		2.2 NAME		
STREET ADDRESS	PARKLAND FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PANKLAND FL	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	. Change Addii	tion
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	41 TITLE	Change Addi	tion
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addil	ion
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addit	ion
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		i
CITY-ST-ZIP			6.4 CITY-ST-ZIP		