## 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

	1930				
	MENT # \$9370	9 (1)			
KURT	s sports, inc.				
				A PROGRAMA AND HOURS HAVE PROGRAMMED CORE STOLEN	(BIT BIRTH BIRTH BIRTH BIRTH JRA
Principal Plac	e of Business	Mailing Address			ifter didte fiffer deftat difter effet
5747 W IRLO BRONSON HWY KISSIMMEE FL 34746		5747 W IRLO BRONSON HWY			
VISSIMMEE I	rL 34/40	KISSIMMEE FL 34746		DO NOT WRITE IN THE	S SPACE
				3. Date Incorporated or Qualified	
				11/12/1991	
· · · · · ·	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# ato	Suite, Apt. #, etc.		59-3096872	Not Applicable
22	#, <b>6</b> 10.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	θ	City & State		6. Election Campaign Financing	· · · · · · · · · · · · · · · · · · ·
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren			10. Name and Address of New Registere	d Agent
KU		rt	81 Name		
	DO INTERNATIONAL DR.		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
OR	RLANDO FL 34748		83		
			63		
			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508. Florida Statu	ites, the above-named cor	rporation submits this statement for the purpose	of changing its registered
office or r	egistered agent, or both, in the State	of Florida, Such change was ations of Section 607 0505. FL	authorized by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap-	ppointment as registered
SIGNATURE	in ignition with, and accept the obligi	11, EQCO, 100 (1011)390 ,10 611011s	iona sialules.		
SIGNATURE	Signature, typed or printed name of registered age	ent and late if applicable (NOT	TE Registered Agont e-gnature requ	uited when reinstaling) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AF	
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME	JOSEPHS, DELROY	n/	1,2 NAME		
STREET ADDRESS	5747 W IRLO BRONSON HW	Y	1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	KISSIMMEE FL D	DELETE	1.4 CITY-S1-ZIP		☐ Change ☐ Addition
NAME	JOSEPHS, KURT	L. Diccie	2.1 TITLE 2.2 NAME		L Change    Addition
STREET ADDRESS	5600 INTERNATIONAL DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		2.4 CITY-ST-ZIP		
TITLE		DELETE	31 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
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZiP		Change Addition
NAME		□ preces	6.1 TITLE 6.2 NAME		☐ Change ☐ Addition
STREET ADDRESS					
STREET POURCOS			6.3 STREET ADDRESS		

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 recenter 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, of on an attachment with an address.

To hall what Jacque Mular

CR2E034 (10/97)

**FILED** 

Jan 27 1998 8:00am

Secretary of State