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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 02 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

CITY-ST-ZIP

1. Corporation	MEN   # <b>V24116</b>	8 (8)			
BOCA	SPORTSPLEX DEVELOPMEN	IT CORP.			
Principal Plac	ce of Business	Mailing Address		·	
		7188 MANDARIN DR			
7188 MANDARIN DR BOCA RATON FL 33433		BOCA RATON FL 33433			
US		US		DO NOT WRITE  3. Date Incorporated or Qualified	IN THIS SPACE
				03/26/1992	
2. Principal f	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0322754	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Sta	15	City & State			Fee Hequired
23	ie .	28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pal-	
24	25	29	30	Personal Property Tax due June	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	pistered Agent
	INGS INC		81 Name		
3732 NW 16TH ST			62 Street Add	Street Address (P.O. Box Number is Not Acceptable)	
FT	LAUDERDALE FL 33311		83		
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607,0502	and 607.1508, Florida Statu	ites, the above-named co	rporation submits this statement for the pu ation's board of directors. I hereby accept	
office or agent. I a	registered agent, or both, in the State ( am familiar with, and accept the obligat	of Florida, Such change was ions of, Section 607.0505, F	authorized by the corporation of	ation's board of directors. I hereby accept	t the appointment as registered
SIGNATURE	· · · · · · · · · · · · · · · · · · ·				
	Signature, typod or printed name of registered agen		TE: Registered Agent signature req	<u></u>	DATE
12. TITLE	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	RODSTEIN, MARC		1,2 NAME		
STREET ADDRESS	7188 MANDARIN DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP		
TITLE	DT	☐ DELETE	2.1 TITLE		Change Addition
NAME	KRESS, ALEXANDER		2.2 NAME		
STREET ADDRESS	13749 PARC DR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BCH GARDENS FL	- Driver	2. 4 CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	Dobara DAMO
TITLE	OVP	☐ DELETE	3.1 TITLE	•	Change Addition
NAME	MULLIN, ROBERT		3.2 NAME		•
STREET ADDRESS	6571 SERENA LN BOCA RATON FL		3.3 STREET ADDRESS ( 3.4. CHTY-ST-ZIP		
CITY-ST-ZIP TITLE	D D	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	RODSTEIN, ALBERT		4. 2 NAME		
STREET ADDRESS	4775 PINE VIEW CIRCLE		4.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33345		4.4 CITY - ST - ZIP		
TITLE	D	☐ DELET <b>E</b>	5.1 TITLE		☐ Change ☐ Addition
NAME	GINSBERG, JAMES		5.2 NAME		
STREET ADDRESS	1496 HAMPTON RD.		5.3 STREET ADDRESS		
CITY-ST-ZIP	RYDAL PA 19046	The letter	5.4 CITY-ST-ZIP		Ahara Laine
TITLE		DELETE	6.1 TITLE		Change Addition
NAME STREET ADDRESS			6.2 NAME 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 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.