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CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN -1 AM 9:15

DOCUMENT # V38124 (6)

1. Corporation Name

W.D. LICIUM SPORT DEVELOPMENT CORP.

Principal Place of Business	Mailing Address
1617 N. FLAGLER DRIVE W. PALM BEACH FL 33407	1617 N. FLAGLER DRIVE W. PALM BEACH FL 33407

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26 P.O. Box 33209
Suite, Apt #, etc 22	Suite, Apt #, etc 27
City & State 23	City & State 28 Palm Beach Gardens FL
Zip 24 Country 25	Zip 29 33420 Country 30 U.S.A.

3. Date Incorporated or Qualified: 05/21/1992
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0334021 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GRANDJEAN, JEAN-MICHEL 767 FORESTERIA AVE. WELLINGTON FL 33414	81 Name: Marian Pearlman Nease 82 Street Address (P.O. Box Number is Not Acceptable): 5355 Town Center Rd 83 Suite 801 84 City: Boca Raton FL 85 Zip Code: 33486

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: Marian Pearlman Nease DATE: 1/13/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	11 TITLE	PSD ☒ Change ☐ Addition
NAME	FINKBEINER, JACQUES	12 NAME	Finkbeiner Jacques.
STREET ADDRESS	1617 N. FLAGLER DR	13 STREET ADDRESS	(N/A) P.O Box 33209
CITY ST ZIP	W. PALM BEACH FL 33407	14 CITY ST ZIP	Palm Beach Gardens, FL 33420
TITLE		21 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY ST ZIP		24 CITY ST ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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.

SIGNATURE: [signature] JACQUES FINKBEINER 05/15/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0246812 CP