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

PROFIT CORPORATION ANNUAL REPORT



SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 25 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # V:

V38124

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W.D. LICIUM SPORT DEVELOPMENT CORP.

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Principal Place of Business Mailing Address  1617 N. FLAGLER DRIVE POBOX 33209							* 18911 81190	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		11 6-61- 9-9-1 W-9-1							
SARDENS FL 33420-3209		1617 N. FLAGLER DRIVE W. PALM BEACH FL 33407															
	•	00							US			3	Date Incorp 05/21/19	orated or Qualifie		Date of Last R 4/02/1996	leport
iress	Mailing Address	20.	SS	lace of Business	ncipal Fla	<b>2.</b> P	2. Principal Place of	of Business	2a. Mailing Address			4	, FEI Number			Ar	opli <b>ed</b> For
		26				21							65-0334	021			ot Applicable
f, etc.	Suite, Apt. #, etc.	27		#, etc	ite, Apt #	S 22	Suite, Apt #, etc.	c	<del>                                     </del>			5.	. Certificate o	f Status Desired			Additional equired
,	City & State	28		e	ty & State	C 23	City & State					6	. Election Car Trust Fund (	npaign Financing Contribution	, .		May Be to Fees
Country	Zip		Country	T	)		Zip	Country		Country	<del></del>	8	This corpora	tion has liability	for intangib		
30		29	5	25		4	4	25	29	30			Florida State	•		∐ No	
	lered Agent	Current Regist	nd Address of	9, Name and			9, 1	Name and Address of Current F	Registered Agent		<del>-</del>	10	. Name and	Address of New	Registered	J Agent	
81 1			I PERALMA	ase, marian f	NEA:		NEASE, N	, marian peralma		81	Name						
<b>82</b> S			nter RD	5 TOWN CENT	5355		5355 TOV	OWN CENTER RD		62	Street /	Address (	P.O. Box Num	ber is Not Accer	otable)		<del></del>
				801	STE		STE 801	1		L		,					
83			L 33486	CA RATON FL	BOC		BOCA RA	RATON FL 33486		83							
84 0										84	City					85 Zip	Code
"" "										"	City				F		0000
rida Statutes, the above-n	07.1508, Florida Statu	607.0502 and 60	ns of Sections 6	to the provisions	ursuant to	11.	11. Pursuant to the	e provisions of Sections 607.0502 a	and 607.1508, Florida State	utes, the abov	e-named	corporati	on submits thi	s statement for th	ne purpose	of changing i	ts registered
inge was authorized by th 7.0505, Florida Statutes.	ia. Such change was , Section 607.0505, Fi	ne state of Florida ne obligations of,	nt or both, in th , and accept th	egistered agent mi familiar with, a	riide or re gent I am		office or register agent. Lam fami	tered agent or both, in the State of miliar with, and accept the obligation	or Florida. Such change was tions of, Section 607.0505, F	s aumonzed b Florida Statute	y me com s.	oration s	poard or direc	xors. I nereby ac	copi me et	xpointment as	registered
		-	•				SIGNATURE .	•									
(NOTE: Registered Agent 6	If applicable (NO	istered agent and title If	printed name of regi	Signature, typed or pri	ATOTIC S	SiGi	Signatur	eure, typed or pointed name of registered agent a	t and title if applicable (NC	OTE: Registered Ag	ent signature	required who			DATE		
13.		ERS AND DIREC	OFFICE	Tributan		12.		OFFICERS AND I		13.			ADDITIONS/0	HANGES TO OF	FICERS AN		
DELETE 1.1 TITLE	DELETE			PSD	[	TITLE			☐ DELEYE	1.1 TITLE	Į			•		Change	☐ Addition
1.2 NAME		\$	er, Jacques		Ì	NAME		inkbeiner, Jacques		1.2 NAME			A				
1.3 STREET ADI		N/A			ADDRESS	STREE			•	1.3 STREE	1 ADDRESS	N/	13				
1.4 CITY-ST-Z			H GDNS FL	PALM BCH	T - ZIP	CHY-	CHY-ST-ZIP PAL	ALM BCH GDNS FL		1.4 CITY-	ST-ZIP						
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quality for the exemp	is filing des per qua	supplied with thi	the information	by certify that the	do hereb	14.	14. I do hereby cert	ertify that the information supplied i	with this filling does not que	alify for the ex	emption s	tated in S	Section 119.07	(3)(i), Florida Sta	tutes I furth	er cert fy that	t the
6.3 STREET AD	is filing coes per qua ental pooral report is eiver or lutetie emper arachment with to a	supplied with thi port or supplementation or the rece anged, or on an a	the information of this annual rep or of the corpor Block 13 if chai	by certify that the on indicated on the fficer or director in Block 12 or Block	1 - 719	STREE	STREET ADDRESS	ertify that the information supplied vidicated on this annual report or sugar of director of the corporation or thock 12 or Block 13 if changed, or o	with this filing ches per que unplemental about report is the receiver or tratte empor on an attachment with to a	6.3 STREE	T AODRESS ST-ZIP	tated in S that my eport as	Section 119.07 signature shat required by C	(3)(i), Florida Sta have the same I napter 607, Florid	tutes. I furth legal effect da Statutes;	ner certify the as if made and that m	na ur y