

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 12, 2002 8:00 am**  
**Secretary of State**

09-12-2002 90062 044 \*\*\*150.00

**DOCUMENT # P99000028894**

1. Entity Name  
**ACCESS SPORTS LIMITED, INC.**

Principal Place of Business  
**4828 KLOSTERMAN OAKS BOULEVARD  
 PALM HARBOR FL 34683**

Mailing Address  
**4828 KLOSTERMAN OAKS BOULEVARD  
 PALM HARBOR FL 34683**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3565919**

Applied For  
 Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SPIEGEL & UTRERA, P.A.  
 343 ALMERIA AVENUE  
 CORAL GABLES FL 33134**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>PSTD.</b> <input type="checkbox"/> Delete
NAME	<b>BERNIER, ARTHUR</b>
STREET ADDRESS	<b>4828 KLOSTERMAN OAKS BOULEVARD</b>
CITY-ST-ZIP	<b>PALM HARBOR FL 34683</b>
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE OF REGISTERED AGENT** **ARTHUR BERNIER** 09/01/02 - 727-937-0564  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachment  
Dr. # 99 9000028894  
B0137507



August 31, 2002

Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

---

**RE: UNIFORM BUSINESS REPORT – ACCESS SPORTS LIMITED, INC.  
EIN # - 59-3565919**

Dear Sir/Madame:

Enclosed is check in the amount of US\$150.00 for payment of the Uniform Business Report filing fee for Access Sports Limited, Inc.

I did not receive a pre-printed prescribed form as my first notice. When I spoke with a person at the Department of State's Division of Corporations, I was informed to submit a check for US\$150.00 and a copy of the UBR form to your office and I would not be subject to a late filing fee.

I can be contacted at 727-937-0564 if you require a further explanation. Thank you for your attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Arthur M. Bernier". The signature is fluid and cursive, with a large initial "A" and "B".

---

Arthur M. Bernier  
President

4828 KLOSTERMAN OAKS BLVD\*PALM HARBOR\*FLORIDA\*34683