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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L43519 DAUER RACING U.S.A., INC.

(2)

Mailing Address

FILED Apr 25 1997 8:00am Secretary of State

914-925-4900

	13968 1841 BIBI(BIBI)	81811 91811 91911 91811 1881

HOLLYWOOD FL 33020 HOLLYWOOD FL 33020-6607							
**************************************					3. Date incorporated or Qualified 01/16/1990	3a. Date of Last Report 04/29/1996	
	Principal Piace of Business 2a. Mailing Address			4. FEI Number		Applied For	
21		26	*		65-0168387		Not Applicable
Sulte, Apt. #, etc. Suite, Apt. 27		Suite, Apt. #, etc.	#, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	6	City & State			6. Election Campaign Financing	\$5	.00 May Be
23		28	T		Trust Fund Contribution		ded to Fees
Zip	Country	Zip	Country	<i>?</i>	8. This corporation has liability for intangible tax under s. 199.032,		
24	25 Name and Address of	29 Current Registered Agent	[30]		Florida Statutes 10. Name and Address of New Reg	Yes No	
GEN	EROTTI, E.J.		81	Name	IV. Name and Address of New Res	istered Agent	
	NANCIAL PLAZA		-				
	10NS BANK #2111		82	Street Add	ress (P.O. Box Number is Not Acceptable	e)	
	LAUDERDALE FL 33394		83				
;			84	City			7:0:
**				' '		PL	Zip Code
11. Pursuant	to the provisions of Sections	607.0502 and 607.1508, Florida Statut	es, the abov	e-named cor	poration submits this statement for the patients board of directors. I hereby accep	rpose of chang	ng its registered
agent. I a	m familiar with, and accept the	ne obligations of, Section 607.0505, Fli	orida Statute	y ine corpora s.	ation's board of directors, I nereby accep	t the appointmer	it as registered
SIGNATURE							
	Signature, typed or printed name of req			int signature requ	ired when reinstating)	DATE.	
12.	PTD	ERS AND DIRECTORS DELETE	13.	 -	ADDITIONS/CHANGES TO OFFICE		
NAME	DAUER, JOCHEN	טבנרוב	1.1 TITLE 1.2 NAME			Cha	nge 🔲 Addition
STREET ADDRESS	% KLASH 2404 HOLLY	WOOD BLVD.		405.01.00			
CITY-ST-ZIP	HOLLYWOOD FL 33020		1.3 STREET 1.4 City - 9	J			
TITLE	V\$	DELETE	2.1 TITLE	11- 211		☐ Cha	nge Addition
NAME	Dauer, Jochen		22 NAME				.,,
STREET ADDRESS	% KLASH 2404 HOLLY\		2 3 STREE	ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33020	•	2 4 CITY-	ST - 20P			
TITLE		DELETE	3 1 THTLE			☐ Cha	nge Addition
NAME			32 NAME				
STREET ADDRESS			3 3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY -	61-7/P			
TITLE		☐ DELFTE	4.1 1111.6			☐ Cha	nge
NAME CYPECY APPROCES			4. 2 NAMÉ				
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - 5 5.1 TITLE	1-711		Cha	nge Addition
NAME		C Steel	5.2 NAME	1			iAc [T] Vocition
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY - S				
TITLE		DELETE	6 1 TITLE			☐ Cha	nge Addition
NAME			6.2 NAME			-	-
STREET ADDRESS			6.3 STHEET	ADDRESS			
CITY-ST-ZIP			64 CITY-S	1			

4. I do 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 tam 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