

2004 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90166 026 ***150.00

DOCUMENT # P02000038824	
1. Entity Name SPEED AND SHOW, INC.	

Principal Place of Business 11211 W ATLANTIC BLVD #107 CORAL SPRINGS, FL 33071	Mailing Address 11211 W ATLANTIC BLVD #107 CORAL SPRINGS, FL 33071
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DO NOT WRITE IN THIS SPACE

	
03172004	No Chg-P
CR2E034 (10/03)	
4. FEI Number 02-0576460	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**RUIZ, JOSE L JR.
11211 W ATLANTIC BLVD #107
CORAL SPRINGS, FL 33071**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO RUIZ, JOSE L JR. 11211 W ATLANTIC BLVD #107 CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RUIZ, LUIS 11211 W ATLANTIC BLVD #107 CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RUIZ, WILLIAM 11211 W ATLANTIC BLVD #107 CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HURLSTON, CASEY 6500 NW 15TH ST. M10 MARGATE, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **04-19-04** **954-746-3701**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #