2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 AUG 6 AM 7:52

DOCUMENT # P06000051522

1. Entity Name
MODERN RACING, INC

Principal Place of Business	Mailing Address
2080 TIGERTAIL BLVD. 2108 DANIA, FL 33004	2080 TIGERTAIL BLVD. 2108 DANIA, FL 33004

07232008 REIN-P CR2E098 (1/07)

2. Principal Place of Business - No P O Box #	3. Mailing Address
4958 SW 90th Way	4958 SW 90th Way
Suite, Apt. #, etc.	Suite, Apt #, etc.
City & State: Cooper City, FL	City & State: Cooper City, FL
Zip: 33328 Country: USA	Zip: 33328 Country: USA

4. FEI Number: 20-5557612 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ELKES, JUSTIN D
2080 TIGERTAIL BLVD.
2108
DANIA, FL 33004

7. Name and Address of New Registered Agent

Name: Elkes, Justin D
Street Address (P.O. Box Number is Not Acceptable): 4958 SW 90th Way
City: Cooper City FL Zip Code: 33328

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 ____________ 7/26/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ELKES, JUSTIN D 2080 TIGERTAIL BLVD, STE 2108 DANIA, FL 33004 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Elkes, Justin D 4958 SW 90th Way Cooper City, FL 33328 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	900134020389 08/06/08--01012--006 **300.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TS 8/5/08 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	REINSTATEMENT 07-08 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: ____________ 7/26/08 954-445-8842
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #