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

Mailing Address

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 03 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000018293 (9)

F.M. MOTORSPORTS INC.

Principal Place of Business

529 67TH STE	REET	529 67TH STREET						•	
#417 HOLMES BEACH FL 34217 US		#417	· · · · · · · · · · · · · · · · · · ·			DO NOT WRITE IN TH	IS SPAO		
		HOLMES BEACH FL 34217 US				3. Date Incorporated or Qualified		<del>.</del>	
00		00				03/08/1993		A.	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		oplied For	
21		<u>⊢</u> γ	26			59-3173491	4.4	ot Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.						Additional	
22		27				5. Certificate of Status Desired	7	equired	
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution		to Fees	
Zip	Country Zip Cou			ntry	7	8. This corporation owes or has paid the	current year Int	tangible	
24	25					Personal Property Tax due June 30. Yes No			
	g, Name and Address of Curren	t Registered Agent		81	,	10. Name and Address of New Register	d Agent		
MILLER, FREDERICK III					Name				
	67TH STREET		82 Street Ad			Address (P.O. Box Number is Not Acceptable)			
#4			0.100.710			,			
-, -	LMES BEACH FL 34217			83		<del></del>			
	. <del>.</del>			84	City		85 Zip	Code	
				-	0,	F	L   3   2	0000	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered									
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE								İ	
OIGHAI OILE	Signature, typed or printed name of registered age		E: Registere	d Age	ent signature	required when reinslating) DATE			
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS A			
TITLE	P	<del></del>		1.1 TITLE			Change	☐ Addition	
NAME	MILLER, FREDERICK III		1.2 NA						
STREET ADDRESS			1.3 \$1	REET	ADDRESS				
CITY-ST-ZIP	HOLMES BEACH FL				T-ZIP		112	T Name	
TITLE	D	DELETE	2.1 TITLE				☐ Change	☐ Addition	
NAME	LAMONICA, PETER S		2.2 NA						
STREET ADDRESS			P		ADDRESS				
CITY-ST-ZIP	A DELETE				ST-ZIP		Change	Addition	
TITLE	<del>-</del>			3.1 TITLE			L_J Change	Addition	
NAME	CASSELLA, THOMAS	111177 700	3.2 N/						
STREET ADDRESS	22600-A LAMBERT STREET, S	SUITE 709		3.3 STREET ADDRESS					
CITY-ST-ZIP	LAKE FOREST CA	DELETE	3.4. CHY-ST-ZIP 4.1 TITLE		51 - ZIP		Change	Addition	
TITLE	<del></del>				j		change	L.J. MODITION	
NAME			4.2 N		1000000				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE	4.4 CC		T · ZIP		Change	Addition	
TITLE	<u> </u>		5.1 Tr				онапус	L. Audition	
NAME			5.2 NA		1000CCC				
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP				T-ZIP		☐ Change	☐ Addition		
TITLE		ביי הנונונ	6.1 10				רדו ∧uanAc		
NAME			6.2 NA		1000000			]	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	artify that the information symplicit w	th this filing does not qualify to	6.4 Ci			d in Section 119.07(3)(i), Florida Statutes. I further	certify that the	information	
indicated	on this annual report or supplementa	l annual report is true and acci	urate and	d tha	at my sigi	nature shall have the same legal effect as if made	under oath; tha	atlaman	
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									
DIOUR 12 C	a bigon to a bilanges, or on an attac			-/	1	· 1 · 1/ / /			