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FILED
Jun 16 1998 8:00 am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P97000081529 (4)
 1. Corporation Name
7 & 7 INDY KART, INC.



Principal Place of Business: **10501 SW 185TH TERRACE MIAMI FL 33157**
 Mailing Address: **10501 SW 185TH TERRACE MIAMI FL 33157**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/19/1997**

4. FEI Number: **65-0781668** Applied For: Not Applicable:

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business

21. **2771 West 76 St.**
 Suite, Apt. #, etc.

22. **Hialeah Florida**
 City & State

23. **33016 USA**
 Zip Country

24. **33016** 25. **USA**

2a. Mailing Address

26. **2771 West 76 St.**
 Suite, Apt. #, etc.

27. **Hialeah, Florida**
 City & State

28. **33016 USA**
 Zip Country

29. **33016** 30. **USA**

9. Name and Address of Current Registered Agent

GADPAILLE, ERIC A
10501 SW 185TH TERRACE
MIAMI FL 33157

10. Name and Address of New Registered Agent

81. Name: **Terje E. Froeiland**

82. Street Address: **277 14610 Bull Run Rd**
 P.O. Box Number is Not Acceptable

83. **#242**

84. City: **Miami Lakes** FL 85. Zip Code: **33014**

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: *[Signature]* DATE: **5/4/98**

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	FROEILAND, TERJE E	
STREET ADDRESS	C/O 10501 SW 185TH TERR	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PRATZLICH, HORST	
STREET ADDRESS	C/O 10501 SW 185TH TERR	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HAACK, MANFRED	
STREET ADDRESS	C/O 10501 SW 185TH TERR	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	HUNT, KATHERINE	
STREET ADDRESS	C/O 10501 SW 185TH TERR	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Froeiland Terje	
1.3 STREET ADDRESS	2771 West 76 St	
1.4 CITY-ST-ZIP	Hialeah, FL 33014	
2.1 TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Pratzlich, Horst	
2.3 STREET ADDRESS	2771 West 76 St	
2.4 CITY-ST-ZIP	Hialeah, FL 33014	
3.1 TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Haack, Manfred	
3.3 STREET ADDRESS	2771 West 76 St	
3.4 CITY-ST-ZIP	Hialeah, FL 33014	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	0000002562501	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	-06/17/98--01030--035	
6.3 STREET ADDRESS	***150.00	
6.4 CITY-ST-ZIP		

14. 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 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 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *[Signature]* DATE: **5/24/98 (305)** **119-100P**

CR2E034 (10/97)