2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F9400005307 1. Entity Name SFX MOTOR SPORTS, INC.							FILED 05 JAN 31 PN 4: 32						
Principal Place 220 WEST 42 NEW YORK, N	ailing Address 20 WEST 42ND STRE EW YORK, NY 10036	WEST 42ND STREET			RINI			A STATE E, FLORIC	1100 N (BB)				
2. Principal Place of Business			3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.				01052005	Chg-P	CR2E	034 (10/03)			
City & State			City & State				4. FEI Number Applied For 74-1990536 Not Applicable				· {		
Zip ,	Country		Zip	Count			5. Certificate	of Status Desired		\$8.75 Add Fee Required			
•	6. Name and Address	of Current Regis	tered Agent				7. Name and	Address of New F	Registered	Agent			
							Name						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301					Street Address (P.O. Box Number is Not Acceptable)								
					City		•		FL	Zip Code	e		
8. The above	named entity submits this s	tatement for the p	ourpose of changing its	s registere	ed office or	register	ed agent, or bo	th, in the State of Fl	orida. I am	familiar with,	and accept		
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 Delicary Deborah D Skipper 1/3//2005													
0.0.0.0.0.0.0	Signature, typed or printed name of re	gistered agent and title	f applicable. (NO	*Asst	ADEA RIGHTA	re required AS	when reinstating)		DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees													
10.	ÖFFI	CERS AND DIREC	CTORS	11.			ADDITIONS	CHANGES TO OF	ICERS AN	D DIRECTOR:	S IN 11		
TITLE	CEO Delete III									Change	☐ Addition		
NAME	BECKER, BRIAN					700045732377							
STREET ADDRESS City-St-Zip	1										,		
TITLE P Delete Til										☐ Change	Addition		
NAME													
STREET ADDRESS 495 NORTH COMMONS DR				ET ADDRESS - ST-ZIP									
CITY-ST-ZIP						Dire	ector				- Addition		
TITLE DEVP Delete TITLE							dall T.	Mave		Change	Addition		
NAME STREET ADDRESS	·						East Ba						
CITY-ST-ZIP						San	Antonio	, TX 78209	9				
TITLE	EVP		☐ Delete	TITLE						☐ Change	Addition		
NAME HEAD, DALE A				NAM	_								
STREET ADDRESS					ET ADDRESS -ST-ZIP	ı							
CITY-ST-ZIP	HOUSTON, TX 77027	<u></u>	Delete	TITLE						☐ Change	Addition		
1 = 11					E I								
STREET ADDRESS 200 EAST BASSE RD.				STRE	ET ADDRESS								
CITY-ST-ZIP	-ST-ZIP SAN ANTONIO, TX 78209				-S1 · ZIP			·			~		
TITLE	7				E	CFO	******			Change	Addition		
NAME WYKER, KENNETH E GC STREET ADDRESS 200 EAST BASSE RD.			NAM STRE		ET ADDRESS		thy Willard 00 West Loop South						
CITY-SI-ZIP SAN ANTONIO, TX 78209							ston, TX						
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 tweetee 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: Dale A. Head 1/25/2005 917-421-577 SIGNATURE: Date Date Date Date Date Date Date Date										L-5773			
	Signatural	O TIPED ON PHINTE		QA DINEC									



ACCOUNT NO. : 072100000032 REFERENCE AUTHORIZATION COST LIMIT : \$ 150.00 ORDER DATE: January 28, 2005 ORDER TIME : 11:22 AM ORDER NO. : 172220-045 CUSTOMER NO: 4375356 CUSTOMER: Ms. Christina V. Lynge Clear Channel Entertainment 5th Floor 220 West 42nd Street New York, NY 10036 ANNUAL REPORT FILING NAME: SFX MOTOR SPORTS, INC. XX ANNUAL REPORT PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY ___ PLAIN STAMPED COPY __ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Amanda Haddan - Ext. 2955

EXAMINER'S INITIALS: