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Jan 28, 1999 8:00am

Secretary of State

01-28-1999 90013 032 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9800003307 1. Corporation Name

DR. DIECAST RACING COLLECTIBLES, INC.

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Principal Place	of Business	Mailing Ad	dress					4 }	0111 1 8 01 10 01
•		1853 AIRLA							,
1853 AIRLANE DR. 1853 AIRLANE DR. NASHVILLE TN 37210 NASHVILLE TN 37210			• •		•	DO NOT WORT IN	LUC CDACE	•	
	•	•					DO NOT WRITE IN T	HIS SPACE	
:							3. Date Incorporated or Qualifed		
·.	`		·			<u>.</u>	06/11/1998 4. FEI Number	App	lied For
2. Principal Pl	lace of Business	2a. Mailing	Address					<u> </u>	Applicable
21		26	A - 4 44 - 4-			· · ·	62-1440078	\$8.75 A	
Suite, Apt. :	#, etc.	<u>⊢</u>	Suite, Apt. #, etc.				5. Certificate of Status Desired	Fee Red	
22		27	27 City & State				6. Election Campaign Financing	\$5.00	-
City & State	e	— <u> </u>	\vdash				Trust Fund Contribution	Added to	*
23	Country	28 Zip		Col	untry		This corporation owes the current year		
Zip	Country	29	Ī	30	<u>,</u>		Personal Property Tax.	☐Yes	No No
24	9. Name and Address o			30			10. Name and Address of New Registe	red Agent	
		FARANCE.			81	Name	***		
REXI	RODE, ROBERT	ter en er ter e				·		<u>_</u>	 .
128 4740	W. INTERNATIONAL SP	EEDWAY, BC #378			82	Street Add	ress (P.O. Box Number is Not Acceptable)	and the second of the second of the second	13010 10 21 1471
	TONA BEACH FL 32114	,			83	-			11 122 1621
							工程的工作。		614 1181 (114
					84	City		FL 85 Zip C	ode
3200 3200 330°	ti at a section of Costions	607 0602 and 607 1509	Elorida Statute	e the s	hove	-named corr	antion authorite this statement for the nurnes	e of changing its	registered
							on's board of directors. I hereby accept the a	ppointment as reg	istered
—agent. (rai	egistered agent, or both, in the familiar with, and accept the	he obligations of, Section	n 607.0505, Flor	10a Sta	iules.				.
SIGNATURE	Signature, typed or printed name of rec	ristored event and title if explicable	e (NOTE	Registere	d Agent	t signature require	ed when reinstating), hours DAT	E	
12.		ERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	RS IN 12
TITLE	CS		☐ DELETE	1.1 T	TTLE		37 441 (77)	☐ Change	☐ Addition
NAME	HART, LOUIS	ļ	•	1.2 N	AME	}			
STREET ADDRESS	1853 AIRLANE DR.	. •		1.3 5	TREET	ADDRESS			I
CITY-ST-ZIP	NASHVILLE TN 37210			140	יווע פֿיז	r-ZiP			l
TITLE	PVC	·							
	STONE, DENNIS		□ DELETE	_	MLE			☐ Change	Addition
NAME	ARRON AND DIDAY TACKO		☐ DETE IF	2.1 T	TILE			☐ Change	☐ Addition
STREET ADDRESS	T and the second	ON DADKWAY	□ DETE IF	2.1 T 2.2 N	TITLE NAME			☐ Change	Addition
CITY-ST-ZIP	LIEDMITACE TNI 97076		∐ UELETE	2.1 T 2.2 M 2.3 S	TITLE NAME STREET	ADDRESS		☐ Change	Addition
TITLE SOUTH	HERMITAGE TN 37076		DELETE	2.1 T 2.2 M 2.3 S 2.4 G	TITLE NAME	ADDRESS		☐ Change	Addition
1000 mg (2002)	State of the		abv .*	2.1 T 2.2 N 2.3 S 2.4 (TITLE NAME STREET CITY-S	ADDRESS			·
NAME :			abv .*	2.1 T 2.2 M 2.3 S 2.4 P 3.1 T 3.2 M	TITLE VAME STREET CITY-S TITLE VAME	ADDRESS T-ZIP	()		·
STREET ADDRESS			abv .*	2.1 T 2.2 M 2.3 S 2.44 3.1 T 3.2 M 3.3 S	TITLE STREET CITY-S TITLE VAME STREET	ADDRESS T-ZIP			·
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	AUDER BEING BURGER		DELETE	2.1 T 2.2 M 2.3 S 2.4 d 3.1 T 3.2 M 3.3 S 3.4 d 4.1 T 4.2 d 4.3 S	MAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET	ADDRESS T-ZIP TADDRESS T-ZIP		☐ Change	Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	TOTAL STATE OF THE	GNEENSTA kao BREZ Terro Tao III	DELETE	2.1T 2.2M 2.3 S 2.44 3.1T 3.2M 3.3 S 3.4.4 4.11 4.2 4.3 S 4.4 G 5.11 5.21	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET	ADDRESS T-ZIP TADDRESS T-ZIP TADDRESS T-ZIP TADDRESS		Change	Addition
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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 of rustee 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: