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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

Apr 01 1998 8:00am Secretary of State

FILED

	INN RACING, INC.		<u> </u>	· · · · · · · · · · · · · · · · · · ·		
Principal Plac		Mailing Address	493D			
AUTO EXOTICS BY PETER 3000 N. OCEAN DR. #27D 1354 S. KILLIAN DRIVE RIVIERA BEACH FL 33404						
LAKE PARK FL 33403				DO NOT WRITE IN THIS SPACE		
US					3. Date Incorporated or Qualified 06/18/1985	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21	26			59-2548844	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	6	City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	28	Cou	ntrv	8. This corporation owes or has paid the	
24	25	29	30	,	Personal Property Tax due June 30.	Yes No
	g, Name and Address of Curi		11		10, Name and Address of New Registere	
CO	DLARUSSO, JUDY FINN	-		81 Name		
3000 N. OCEAN DR. APT. 27-D				82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	NGER ISLAND FL 33404			Street Aut	diess (F.O. box Number is Not Acceptable)	
			İ	63		
			}	B4 City		85 Zip Code
				City	F	L S Zip Code
office or r agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the ob-	ate of Florida. Such change wa	as authorized	by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	e of changing Its registered appointment as registered
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable ()	NOTE Registered	Agent signature requ	uired when reinstating) DATI	<u> </u>
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 10	LE		☐ Change ☐ Addition
NAME	COLARUSSO, JUDY FINN		1.2 NA	ME		
STREET ADDRESS	3000 N OCEAN DR #27-D		1.3 \$1	REET ADDRESS		li
CITY-ST-ZIP	SINGER ISLAND FL		1.4 CF	Y-ST-ZIP		
TITLE	D	☐ DELETE	2.1 7(1	LE		Change Addition
NAME	COLARUSSO, PETER ROB		2.2 NA	ME		
STREET ADDRESS	3000 N OCEAN DR #27-D	•	2.3 \$1	REET ADDRESS		
CITY-ST-ZIP	SINGER ISLAND FL			TY-ST-ZIP	<u> </u>	I Towns I Towns
TITLE	į	L. DELETE	3.1 1(1			☐ Change ☐ Addition
NAME			3.2 NA	· · · · · · · · · · · · · · · · · · ·		
STREET ADORESS				REET ADDRESS		
CITY - ST - ZIP		DELETE		TY-ST-ZIP		Change Addition
TITLE		L DELETE	4.1 (1)			CT change CT vanigation
NAME			4. 2 N	I .		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP	ļ	DELETE	4.4 Cf 5.1 Tfl	Y-ST-ZIP		Change Addition
TITLE		LJ OLLEIE				C Attended C Manufall
NAME CIDELL ADDOCCO			5.2 NJ	I .		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CI 6.1 TII	Y-ST-ZIP		Change Addition
NAME	1		3 O. I III			\$1.0.195
NUMBE .			E CO NI	ME I		Į.
CTOCCT ADDOCCC			6.2 NA	1		
STREET ADDRESS			6 3 ST	ME REET ADDRESS Y-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 on an adjustment with an address.

S61833-2099