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

Mar 12 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** J50725 STAVROS RACING, INC. Principal Place of Business Mailing Address 111 SECOND AVE NE 510 111 SECOND AVE NE 510 ST PETERSBURG FL 33701-3485 ST PETERSBURG FL 33701-3465 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1987 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 348 La Hacienda Drive 26 348 La Hacienda Drive 59-2777250 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Indian Rocks Beach, FL 28 Indian Rocks Beach, FL Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible 33785-3715 29 33785-3715 US Personal Property Tax due June 30. Yes 25 g. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name STAVROS, MARK D. 348 LA HACIENDA DR Street Address (P.O. Box Number is Not Acceptable) 82 INDIAN ROCKS BCH FL 34635 **B3** Zip Code 33785 84 City 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, typed or printed harne of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition Change TITLE 11 TITLE STAVROS, MARK D. 1.2 NAME NAME 348 LA HACIENDA DR STREET ADDRESS 1.3 STREET ADDRESS INDIAN RCKS BCH FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE ☐ Change ☐ Addition TITLE 2.1 TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change ☐ Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 employees 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 attact plent with an address.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

may B Alana

DELETE

100 813-596-4683

Change

Addition

FILED