FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
95 AUG -3 AM 9:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **J74644** **(2)**

1. Corporation Name
AARON GREEN MOTORSPORTS, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
4037 QUEEN ANNE DRIVE ORLANDO FL 32839-3242	4037 QUEEN ANNE DRIVE ORLANDO FL 32839-3242

3. Date Incorporated or Qualified: 05/21/1987
3a. Date of Last Report: 04/28/1994

2. Principal Place of Business	2a. Mailing Address
21 10434 Riva Ridge Tr.	26 10434 Riva Ridge Tr.
Suite, Apt. #, etc. 22 ========	Suite, Apt. #, etc. 27 =========
City & State 23 Orlando, FL.	City & State 28 Orlando, FL.
Zip / Country 24 32817 / 25 U.S.A.	Zip / Country 29 32817 / 30 U.S.A.

4. FEI Number: 59-2900038 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
JOHNSON, MATTHEW M. 1524 E. LIVINGSTON STREET ORLANDO FL 32803	81 Name: Aaron Green 82 Street Address (P.O. Box Number is Not Acceptable): 10434 Riva Ridge Trail 83 ========== 84 City: Orlando, FL 85 Zip Code: 32817

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: Aaron Green AARON GREEN - PRESIDENT 7-25-95
Signature of officer or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	Same ☒ Change ☐ Addition
NAME	GREEN, AARON	12 NAME	Same
STREET ADDRESS	4037 QUEEN ANNE DR.	13 STREET ADDRESS	10434 Riva Ridge Tr.
CITY-ST-ZIP	ORLANDO FL	14 CITY-ST-ZIP	Orlando, FL. 32817
TITLE	ST	21 TITLE	Same ☒ Change ☐ Addition
NAME	GREEN, AARON	22 NAME	Same
STREET ADDRESS	4037 QUEEN ANNE DR.	23 STREET ADDRESS	10434 Riva Ridge Tr.
CITY-ST-ZIP	ORLANDO FL	24 CITY-ST-ZIP	Orlando, FL. 32817
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 attachment with an address.

SIGNATURE: Aaron Green AARON GREEN - PRESIDENT 7-25-95 (407) 282-3721
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0418547 FP