

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000004766

Entity Name: FLUID MOTORSPORTS, LLC

FILED
Jun 17, 2009
Secretary of State

Current Principal Place of Business:

511 TREE SHORE DR.
ORLANDO, FL 32825

New Principal Place of Business:

Current Mailing Address:

511 TREE SHORE DR.
ORLANDO, FL 32825

New Mailing Address:

FEI Number: 20-8244292 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SCHOPPERT, MAKOTO
511 TREE SHORE DR.
ORLANDO, FL 32825 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCHOPPERT, MAKOTO
Address: 511 TREE SHORE DR.
City-St-Zip: ORLANDO, FL 32825 US

Title: MGR () Delete
Name: SCHOPPERT, SEIJI
Address: 2908 DELCREST DR
City-St-Zip: ORLANDO, FL 32817 US

Title: MGR () Delete
Name: DOUAI, BRICE
Address: 2908 DELCREST DR
City-St-Zip: ORLANDO, FL 32817 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MAKOTO SCHOPPERT

MGRM

06/17/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date