File on or before May 1, 1998 or Limited Liability Company will be Subject to a \$ 400.00 LATE FEE.							
LIMITED LIABILITY COMPANY ANNUAL REPORT		Sandra B. Mo Secretary of	PRIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State IVISION OF CORPORATIONS		FILED 98 HAY -4 PH 3: 45		
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Mailing Address of Limited Liability Company DOCUMENT # L96000000626				SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Royal Synthetic Racing LC 4160 Ravenswood Rd				1a. Principal Piace of Business Address 4/60 Ravenswood Rd Ft Lawlerdate FL 33312			
2. Princip L Suite, Apt.	A Place of Business LO Runnswood Rd 2116 Suite, April	33315 ng Address DRAIXNSIL . #, etc.	pood Rd	3. Date Organized Le - 30 4. FEI Number	d or Qualified	•	
City & State For Laude dale FL Zip Zip Zip Zip Zip Zip Zip Zi				65-01e 5. Date of Last Re	eport	6. Certificate of Status Desired 58.75 Additional Fee Required	
Relly Jevemiah J III			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable)				
- 4160 Ravenswood Rd F4 Lauderdale F1 33312			Sulte, Apr. #, etc05/12/9801034021 City ####188.75 FL				
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited (liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the objections. SIGNATURE DATE Trapplicate Apent Accepting Appointment (NOTE: Registered Agent signature required when reinstating)							
10. Title	Managing Members/Managers	T	ss Street Address		City,	, State and Zip Code	
Mem	Kelly, Jeremiah TIII	HI60 Rav	enswood	Rd .	F1 Lac	uderdale FL 33312	
				d	ردو		

11 Ido hereby certify that the inform indicated on this annual report is 4 limited liability company or the attachment with an address

or the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information shall have the same legal effect as if made under eath; that I am a managing member or manager of the ecute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an