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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M11009

(1)

Mailing Address

SPEEDWAYS AUTO SUPPLIES, INC.

FILED Feb 21 1997 8:00am Secretary of State

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8501 S.W. 86 COURT MIAMI FL 33143	8501 S.W. 86 COURT MIAMI FL 33143-6935	•						
us	US			The Date of Lead Decad				
			3. Date Incorporated or Qualified 02/04/1985	3a. Date of Last Report 05/21/1996				
2. Principal Place of Business	2a. Mailing Address		4, FEI Number	Applied For				
21	26		59-2492844	Not Applicable				
Suite, Apt #, etc.	Suite, Apt. #, etc.	,	5 Contilinate of Chattan Donison	\$8.75 Additional				
22	27		6. Certificate of Status Desired	Fee Required				
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be				
23	28		Trust Fund Contribution	Added to Fees				
Zip Country	Zip	Country	8. This corporation has liability for i	ntangible tax under s. 199.032,				
24 25	29	30	Florida Statutes Yes 🗹 Yo					
9. Name and Address of Current F	Registered Agent		10. Name and Address of New Re	glatered Agent				
Sunjanani, Ramesh		81 Name	SUJANANI, RAM	ESH.				
8503 S.W. 86 COURT			Address (P.O. Box Number is Not Acceptate					
MIAMI FL 33143			501. SW 86 COURT					
		β3		·				
		84 City		les l Zin Codo				
		D4 City	MIAMI	FL 85 Zip Code 33/43				
11. Pursuant to the provisions of Sections 607.0502 a office or registered agent, or both, in the State of	and 607.1508, Florida Statu	tes, the above-named	corporation submits this statement for the p	urpose of changing its registered				
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation	Florida, Such change was ons of Section 607,0505. Fl	authorized by the corp lorida Statutes.	oration's board of directors. I hereby accep	ot the appointment as registered				
				ļ				
SIGNATURE Signature typed or printed name of registereo agent a	and title if applicable. (NO	TE: Registered Agent signature	required when reinstating)	DATE				
12. OFFICERS AND I	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	DERS AND DIRECTORS IN 12				
TILLE PD	DELETE	1.1 TITLE	PD	Change				
NAME SUNJANANI, RAMESH		1.2 NAME	SUJANANI, RAMES	SH.				
STREET ADDRESS 8501 SW 86 CT		1.3 STREET ADDRESS	WENT CHI CLEST					
CITY-ST-ZIP MIAMI FL		1.4 CITY-ST-ZIP	8501. 8W 86 CT.	4.33/43.				
TITLE	DELETE	2.1 TITLE		Change Addition				
NAME		2.2 NAME						
STREET ADDRESS		2.3 STREET ADDRESS						
CITY-ST-7IP		2 4 CITY-ST-ZIP	•					
TILE	DELETE	31 TITLE		Change Addition				
NAME		32 NAME		÷				
STREET ADDRESS		3 3 STREET ADDRESS						
CHY-SI-ZIP		3.4. CITY - ST - ZIP						
TITLE	☐ DELETE	4.1 TITLE		Change Addition				
NAME		4. 2 NAME						
STREET ADDRESS	,	4.3 STREET ADDRESS		Ì				
CITY-ST-ZIP		4.4 CITY - ST - ZIP						
TITLE	☐ DELETE	5.1 TITLE		Change Addition				
NAME		5.2 NAME		· .				
STREET ADORESS		5.3 STREET ADDRESS						
C(Ty-ST-ZIP		5.4 CITY - ST - ZIP						
TITLE	DELETE	6.1 TITLE		☐ Change ☐ Addition				
NAME		6.2 NAME						
STREET ADDRESS			1	ľ				
1		B D 3 STREET AUGMESS 4						
Crty - St - ZiP		6.3 STREET ADDRESS 6.4 City-St-Zip						

4. I do 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 attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Feb 17 1997

(303) 595