2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# N07000008585

Entity Name: SOUTH FLORIDA KARTING CLUB INC

Current Principal Place of Business:

7955 NW 12 STREET, SUITE 400
MIAMI, FL 33126

New Principal Place of Business:

1470 NW 107 AVENUE
SUITE E
MIAMI, FL 33172

Current Mailing Address:

7955 NW 12 STREET, SUITE 400
MIAMI, FL 33126

New Mailing Address:

1470 NW 107 AVENUE
SUITE E
MIAMI, FL 33172

FEI Number: 26-2514415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CHAPONICK, EVELYN
7955 NW 12 STREET, SUITE 400
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

CHAPONICK, EVELYN
1470 NW 107 AVENUE
SUITE E
MIAMI, FL 33172 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: EVELYN CHAPONICK 05/01/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CHAPONICK, EVELYN
Address: 7955 NW 12 STREET, SUITE 400
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Delete
Name: CHAPONICK, DORE
Address: 7955 NW 12 STREET, SUITE 400
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: CHAPONICK, EVELYN
Address: 1470 NW 107 AVENUE SUITE E
City-St-Zip: MIAMI, FL 33172

Title: D (X) Change ( ) Addition
Name: CHAPONICK, DORE
Address: 1470 NW 107 AVENUE SUITE E
City-St-Zip: MIAMI, FL 33172

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 or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DORE CHAPONICK D 05/01/2008
Electronic Signature of Signing Officer or Director Date