


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 28, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P00000034289</b> 1. Entity Name <b>SK RACING, INC.</b>																													
Principal Place of Business <b>6280 PAINTED LEAF LANE NAPLES FL 34116</b>			Mailing Address <b>6280 PAINTED LEAF LANE NAPLES FL 34116</b>																										
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																										
<b>6. Name and Address of Current Registered Agent</b>  <b>WOOD, DOUGLAS A ESQ. SIESKY, PILON &amp; WOOD 1000 NORTH TAMIAMI TRAIL, SUITE 201 NAPLES FL 34102</b>				<b>7. Name and Address of New Registered Agent</b> Name Street Address (P O. Box Number is Not Acceptable) City FL Zip Code																									
8. 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. I am familiar with, and accept the obligations of registered agent.																													
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____																													
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>FILE NOW!!! FEE IS \$150.00</b>  <b>After May 1, 2006 Fee Will Be \$550.00</b>  <b>Make Check Payable to Florida Department of State</b> </div> <div style="width: 35%;">         9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees       </div> </div>																													
<div style="display: flex;"> <div style="width: 48%;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 15%;">D</td> <td style="width: 40%;">NAME</td> <td style="width: 15%;">Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>KREHLING, SCOTT</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td>4220-A GAIL BLVD NAPLES FL 34104</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 15%;">NAME</td> <td style="width: 15%;">STREET ADDRESS</td> <td style="width: 15%;">CITY - ST - ZIP</td> <td style="width: 15%;">Change</td> <td style="width: 15%;">Addition</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	D	NAME	Delete	STREET ADDRESS		KREHLING, SCOTT		CITY - ST - ZIP		4220-A GAIL BLVD NAPLES FL 34104		TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition						
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.																													
<b>SIGNATURE:</b> <u>Scott A. Krehling</u> <span style="float: right;">4/24/06 239-253-1812</span>																													
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																													

