2002 UNIFORM BUSINESS REPORT (UBR)

Sep 11, 2002 8:00 am Secretary of State DOCUMENT # P00000075087 1. Entity Name 09-11-2002 90056 027 ***550.00 R2RACING, INC. Principal Place of Business Mailing Address 13205 SW 137 AVE 13205 SW 137 AVE **STE 108** STE 108 MIAMI FL 33186 MIAMI FL 33186 2. Principal Place of Business 3. Mailing Address 3205 SW 137 AVE DO NOT WRITE IN THIS SPACE ity & State 4. FEI Number Applied For 65-1031399 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KODRIGUEZ RODRIGO Street Address (P.O. Box Number is Not Acceptable) 13205 SW 137 AVE MIAMI FL 331862 N 33136 MARIEM ROLL OF YOU City 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!!-FEE IS \$550:00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (4/02) Delete TITLE ☐ Addition SILIBA, CHARBEL C NAME 13205 SW 137W #108 STREET ADDRESS 13205 SW 137 AVE #108 STREET ADDRESS CITYASTAZIP MIAMI FL 33186 CITY-ST-ZIP MiAMI FI 33186 IIITE 2205 SV Delete Day you TITLE ☐ Change Addition NAME STREET ADDRESS RODRIGUEZ, ROMAN NAME STREET ADDRESS 13705'SW 137 AVE #108 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33186 TITLE ☐ Delete Ď TITLE Change ☐ Addition NAME RODRIGUEZ, RODRIGO NAME STREET ADDRESS 13705 SW 137 AVE #108 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33186** TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Addition NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 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 11 or Block 12 if

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

FILED