

02-03
FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

03 JUN 18 PM 12:06

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # PD1000018502	
1. Entity Name Inspire Motorsports Corp.	

DO NOT WRITE IN THIS SPACE

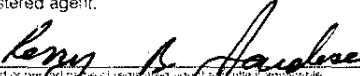
2. Principal Place of Business 1755 Lexington Ave		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Deland, Fl.		City & State	
Zip 32724	Country USA	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 74-2983289	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

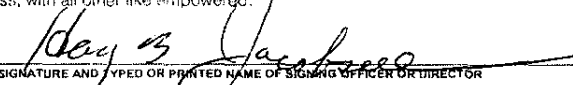
7. Name and Address of Current Registered Agent	
Name KERRY B. JACOBSEN	
Street Address (P.O. Box Number is Not Acceptable) 1050 MCGREGOR RD.	
City DELAND	Zip Code FL 32720

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 	DATE

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
--	--

10. OFFICERS AND DIRECTORS			
TITLE PRESIDENT	NAME KERRY B. JACOBSEN	TITLE	NAME
STREET ADDRESS 1050 MCGREGOR ROAD	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY- ST- ZIP DELAND, FL. 32720	CITY- ST- ZIP	CITY- ST- ZIP	CITY- ST- ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY- ST- ZIP	CITY- ST- ZIP	CITY- ST- ZIP	CITY- ST- ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY- ST- ZIP	CITY- ST- ZIP	CITY- ST- ZIP	CITY- ST- ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY- ST- ZIP	CITY- ST- ZIP	CITY- ST- ZIP	CITY- ST- ZIP
TITLE	NAME	TITLE	NAME
STREET ADDRESS	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY- ST- ZIP	CITY- ST- ZIP	CITY- ST- ZIP	CITY- ST- ZIP

DO NOT WRITE IN THIS SPACE

12. I 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 10 or on an attachment with an address, with all other like empowered.	
SIGNATURE: 	Date: 4/30/23

CR2E034B (12/02)

y 6/18/23

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
JUNE 12,2003

DEAR SIRs:

WE ARE RETURNING OUR PAYMENT FOR THE YEAR 2003 ACCORDING
WITH THE INSTRUCTIONS RECEIVED FROM THE PERSON TO WHOM I
SPOKE A FEW DAYS AGO.

THE DOCUMENT SPECIALIST CHEKED THE INFORMATION ON THE
DEPARTMENT COMPUTER AND DON'T SEE ANYTHING IN REFERENCE TO
THE PAYMENT FOR THE YEAR 2002.

ENCLOSED COPY OF THE REINSTATEMENT RECEIVED FOR US.

THANKS FOR YOUR ATTENTION TO THIS MATTER:

INSPIRE MOTORSPORTS CORP.
ATTN:RAUL JIMENEZ
836 HEATHER GLEN CIRC.
LAKE MARY,FL.32746-6133
407-321-8466
FAX040-302-6714
RMTAXS@BELLSOUTH.NET