

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 10, 2003 8:00 am
Secretary of State

07-10-2003 90116 023 ***158.75

DOCUMENT # **PO 1000047111**

1. Entity Name
FINISH LINE RACING PRODUCTS, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 6671 W INDIANTOWN RD. Suite, Apt. #, etc. 56-431		3. Mailing Address POSTAL DRAWER 2026 Suite, Apt. #, etc.	
City & State JUPITER FL		City & State JUPITER FL	
Zip 33458	Country USA	Zip 33468	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1121406	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name **LAYNES, DAVID A.**

Street Address (P.O. Box Number is Not Acceptable)

120 S. OLIVE AVE, STE 702

City **W. PALM BCH** FL Zip Code **33401**

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 reinstating) 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 NAME STREET ADDRESS CITY - ST - ZIP	PD PAYNE, STEPHEN 6671 W. INDIANTOWN Rd, STE 56-431 JUPITER, FL. 33458	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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: *Stephen Payne A. (6.29.03)* **5/25/03** **(561) 745-0006**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)