2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2005
Secretary of State

DOCUMENT# P01000061101

Entity Name: CYBERNATION MOTORSPORTS CORPORATION.

Current Principal Place of Business:

P.O.BOX 11279
FT LAUDERDALE, FL 333391279

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 11279
FT LAUDERDALE, FL 333391279

New Mailing Address:

FEI Number: 65-1115221 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WARRICK, WOODWARD C
INTERNATIONAL BLD 2455 E SUNRISE BLVD
PENTHOUSE W
FT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HEADLEY, LEE
Address: 3833 SW 167 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: VP ( ) Delete
Name: BOCCHINO, ERNEST G
Address: 6300 DORSAY CT
City-St-Zip: DELRAY BEACH, FL 33484

Title: STD ( ) Delete
Name: BISPOTT, CLEVE
Address: 834 NW 13ND AVE
City-St-Zip: SUNRISE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLEVE BISPOTT STD 05/01/2005

Electronic Signature of Signing Officer or Director — Date