

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90043 032 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000028349

1. Entity Name
TRACK, INC.



Principal Place of Business
**9600 NW 38 ST
MIAMI, FL 33178**

Mailing Address
**9600 NW 38 ST
MIAMI, FL 33178**

2. Principal Place of Business
**100 Wallace Avenue
Suite, Apt. #, etc.
#310**

3. Mailing Address
**P.O. Box 15026
Suite, Apt. #, etc.**

City & State
Sarasota, FL

City & State
Sarasota, FL

4. FEI Number
82-0589137

Applied For
Not Applicable

Zip
34237

Country
USA

Zip
34277

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**SHOPAY, DAVID H
9600 NW 38 ST
MIAMI, FL 33178**

7. Name and Address of New Registered Agent

Name
Jack B. Gerber, P.A.
Street Address (P.O. Box Number Is Not Acceptable)
9400 S. Dadeland Blvd., PH-5
City
Miami **FL** Zip Code
33156

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

Jack B. Gerber, Pres

April 10, 2003

(NOTE: Registered Agent signature required when resigning)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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
PD ☒ Delete
NAME
SHOPAY, DAVID H
STREET ADDRESS
9600 NW 38 ST
CITY-ST-ZIP
MIAMI, FL 33178

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
PD ☒ Change ☐ Addition
NAME
Stanley W. Moore
STREET ADDRESS
100 Wallace Avenue, #310
CITY-ST-ZIP
Sarasota, FL 34237

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
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TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stanley W. Moore

Stanley W. Moore

17 Apr 03

941/365-3800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CH2E034 (10/02)