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FILED Mar 03, 2004 8:00 am **Secretary of State**

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1. Engly Manyo DISCOUNT RACING INC. DO NOT WRITE IN THIS SPACE 91024058 2. Principal Place of Business 4746 Whispering Wind Ave Same Suite, Apt. #, etc Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FELNumber Applied For Tampa FL 51-0447944 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33614 US Fee Required 7. Name and Address of Current Registered Agent **David Brend** DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 4746 Whispering Wind Ave City Tampa 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. January 1 - May 1 Fee is \$150.00 After May 1, Fee Is \$550.00 Amended UBR is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS TITLE CR2E034B (12/02 NAME NAME David Brend STREET ADDRESS STREET ADDRESS 4746 Whispering Wind Ave., Tampa FL 33614 CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME Kathryn Brend STREET ADDRESS STREET ADDRESS 4746 Whispering Wind Ave., Tampa FL 33614 CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TIDE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TILE MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TILE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 cortify 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 David Brend (President)

SIGNATURE: