

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000009977 (9)

1. Corporation Name

INNOVATIVE MOTORSPORTS, INC.

Principal Place of Business

3315 MONEGRO STREET
CORAL GABLES FL 33134
US

Mailing Address

P.O. BOX 144872
CORAL GABLES FL 33114-4872

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 8886 SW 129 TERR
Suite, Apt. #, etc.

22 City & State
23 Miami, FL

24 33176 25 USA
Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country
29 30

3. Date Incorporated or Qualified

12/08/1992

3a. Date of Last Report

01/25/1994

4. FET Number

65-0378024

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

[]

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S-199.032,
Florida Statutes [] Yes [X] No

9. Name and Address of Current Registered Agent

MARQUEZ, JOSE M
780 N.W. LEJEUNE ROAD
SUITE 400
MIAMI FL 33126

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

Signature of the person who is the registered agent of the corporation

Signature of the person who is the registered agent of the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	LITTLE, WILLIAM
STREET ADDRESS	3315 MONEGRO ST.
CITY-ST-ZIP	CORAL GABLES FL
TITLE	S
NAME	GUERRA, ARMANDO J
STREET ADDRESS	8450 S.W. 48TH ST.
CITY-ST-ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	[] Change [] Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-ST-ZIP	
5. TITLE	[] Change [] Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-ST-ZIP	
9. TITLE	[] Change [] Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-ST-ZIP	
13. TITLE	[] Change [] Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-ST-ZIP	
17. TITLE	[] Change [] Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-ST-ZIP	

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***233.75

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William A. Little

6-24-96 305
254-0007