FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1998

DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P93000007511 (7)

PERFECTION RACING, INC.

Principal Place of Business Mailing Address

FILED Feb 25 1998 8:00am Secretary of State



esoo s. gator creek blvd Barasota fl 34241 US			6500 S. GATOR CREEK BLVD SARASOTA FL 34241 US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/29/1993		
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For		
21			26					65-0386936 Not Applicable		
Suite, Apt. #, etc			27	4 4				Certificate of Status Desired Section		
City & Stat				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	25			7ip Country 29 30				8. This corporation owes or has paid the current year lotangible Personal Property Tax due June 30. Yes X No		
9, Name and Address of Current Registered Agent						Т.		10. Name and Address of New Registered Agent		
	vrr, esq., f					81	Narr	Name		
KIRK PINKERTON, P.A. 720 SOUTH ORANGE AVENUE					82	Stre	et Address (P.O. Box Number is Not Acceptable)			
SARASOTA FL 34236										
						84	City	City FL 85 Zip Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office 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 607.0505, Florida Statutes.										
SIGNATURE	Sinnal wa hand o	printed name of registered agent		7.0	ore o		12			
12.	Signatura, typed o	OFFICERS AND			13		nt algnat	gnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PSD	OF TOERS AND	Con it v	DELETE		int£		Change X Addition		
NAME	HINMAN,					NAME		RONALD R. ALGER 4026 ANNIEST		
STREET ADDRESS CITY-ST-ZIP	SARASO	BATOR CREEK BLVD				STREET CITY-S'	ADDRES	-100		
TITLE	VPTD	***************************************		DELETE		TITLE		Change Addition		
NAME .	HINMAN, LYNETTE L			2.21		2.2 NAME 2.3 STREET ADDRESS				
STREET ADDRESS								PESS SAME		
CITY-ST-ZIP				2 4 CI						
TITLE				DELETE		TITLE		Change Addition		
NAME						NAME				
STREET ADDRESS					33	STREET	ADDRES	PAESS :		
CITY-ST-ZIP					3.4.	CITY-S	T-ZIP	np [
TITLE				DELETE	4.1	TITLE		☐ Change ☐ Addition		
NAME					4. 2	NAME				
STREET ADDRESS					4.3 3	STREET.	ADDRES:	RESS		
CITY-ST-ZIP					4.41	CITY - ST	- ZIP	P		
TITLE				☐ DELETE	5.1	TITLE		☐ Change ☐ Addition		
NAME					5.2	NAME				
STREET ADDRESS					5.3 3	STREET	ADORES	RESS		
CITY-ST-ZIP					5.4 (CITY-ST	- ZIP	Р		
TITLE				DELETE	617	ITLE		Change Addition		
NAME					6.2	NAME				
STREET ADDRESS				6.3 STF			ADDRESS	AESS		

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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

2/19/98

941-379-9889