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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000018751

1. Corporation Name

MAJOR MOTOR SPORTS, INC.

Principal Place of Business Mailing Address						i inditant een totan eters aneer a	E\$11 80113 E8187 1		il Eller mer rees
1130 E 15TH ST 1130 E 15TH ST									
PANAMA FL 32405 PANAMA FL 32405						DO NOT ME	ITE IN TUIC	CDACE	
US US						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
		0 14-25- 4-44-				03/09/1993 4. FEI Number		1 A.	pplied For
2. Principal Place of Business 2a. Mailing Address								 	
21 26 26						59-3320883			ot Applicable Additional
Sulte, Apt. #, etc. Suite, Apt. #, etc.						Certifcate of Status Desired		Fee Ro	
22						O. St. C. Annier Financia			
						 Election Campaign Financing Trust Fund Contribution 			May Be to Fees
			Country				ront woor int		
Zip	Country	_ -	_ '	•		This corporation owes the cu Personal Property Tax.	rent year int	angible □Yes	X No
24	9. Name and Address of Currer		<u>'1</u>			10. Name and Address of New	Registered		-
	3. Name and Address of Carton	tt ttogistored Agent	81	Name					
ROESLE, MARTIN J								•**	
823 E 15 STREET			82	Street	Addres	ss (P.O. Box Number is Not Accep	table)		
1130 E 15TH ST			83						
PANAMA FL 32405									
			84	'			FL		Code
office or re agent. I as	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligation of the state of the obligation of the state of the sta	of Florida. Such change was auth tions of, Section 607.0505, Florida	orized by a Statute:	the corpo	oration	s poard of directors, I nereby according to the state of	DATE	99 9	egistered
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO O	FFICERS AN		
TILE	D	☐ DELETE	1.1 TITLE			Λ _{**} -		☐ Change	☐ Addition
NAME	ROESLE, MARTIN J		1.2 NAME		-				
STREET ADDRESS	,		1.3 STREE	TADDRESS					1
CITY-ST-ZIP	ONGSTOWN FL 32466		1.4 CITY-	ST-ZIP	,				
T!TLE		☐ DELETE	2.1 TITLE			•		Change	☐ Addition
NAME		2.2 N				_			
STREET ADDRESS	2		2.3 STREE	TADDRESS					
CITY-ST-ZIP	2.		2. 4 CITY-	ST-ZIP					
TITLE	DELETE 3.1T		3.1 TITLE		-			☐ Change	Addition
NAME			3.2 NAME						
STREET ADDRESS	}		3.3 STREI	TADDRESS					
CITY-ST-ZIP			3.4. CITY-	ST-ZIP					
TITLE	☐ DELETE 4.1		4.1 TITLE					☐ Change	☐ Addition
NAMÉ			4, 2 NAME						
STREET ADDRESS			4.3 STREI	T ADDRESS					
CITY-ST-ZIP			4.4 CITY-	ST-ZIP					
ΠLE		☐ DELETE	5.1 TITLE					☐ Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREI	TADDRESS					
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	L_				
TITLE		☐ DELETE	6.1 TITLE					☐ Change	☐ Addition
171122		u u							

14. 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 chartred, or by an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

850 768 - 1636