Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90048 008 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000008431

Corporation Name

RACETRACK SERVICE STATION, INC.

	· .					
Principal Place of Business Malling Address						
220 SOUTH DIXIE HWY		220 SOUTH DIXIE HWY				
POMPANO BEA	CH FL 33060	POMPANO BEACH FL 33060 US		DO NOT WRITE IN THIS SPACE		
US		00			3. Date Incorporated or Qualifed	
					02/02/1994	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0465501	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 Additional Fee.Required
22		27				
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be Added to Fees
Zip Country		28	Country		8. This corporation owes the current year	
Zip	25	29 3	¬ '		Personal Property Tax.	Yes □No
24	9. Name and Address of Curren	1=0	<u>,                                    </u>		10. Name and Address of New Register	ed Agent
<del></del>	THE TRANSPORT OF THE PARTY OF T		81	Name		
PLANAKIS, MANNY			82	Street As	dress (P.O. Box Number is Not Acceptable)	
2500		02	Street Ac	laress (F.O. abx Number is Not Acceptable)		
FT. L		83				
	•		84	City		85 Zip Code
					F	·L   ``
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was autitions of, Section 607.0505, Florid	orized by a Statutes	tne corpora	progration submits this statement for the purpose ation's board of directors. I hereby accept the ap	pointinent as registered
	Signature, typed or printed name of registered ager		<del></del> .	nt signature requ	uired when reinstating) DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE	P ANALOS MANINIV	C. DELEIC				٠٠٠ - ١٠٠٠ - ١
NAME	PLANAKIS, MANNY		1.2 NAME 1.3 STREET ADDRESS			
STREET ADDRESS			1.4 CITY-ST-ZIP			
CITY-ST-ZIP	FT. LAUDERDALE FL VP DELETE		_	2.1 TITLE		☐ Change ☐ Addition
NAME	PLANAKIS, GEORGE		2.2 NAME			
STREET ADDRESS	2500 NE 23 ST		2.3 STREET	ADDRESS		
CITY-ST-ZIP	PT LAUDEDDAY F. FI		2.4 CITY-ST-ZIP		and the second second	
TITLE	DELETE		3.1 TITLE			☐ Change ☐ Addition
NAME	•		3.2 NAME			
STREET ADDRESS	•		3.3 STREET	T ADDRESS		
CITY-ST-ZIP			3.4. CITY-5	T-ZIP		
TITLE		☐ DELETE	4.1 TTTLE			Change Addition
NAME			4.2 NAME	İ		
STREET ADDRESS			4.3 STREET	FADDRESS		
CITY-ST-ZIP			4.4 CITY-5	T-ZIP		
TITLE		☐ DELETE	5.1 TITLE	}		☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS				TADORESS		
CITY-\$T-ZIP			5.4 CITY- S	T- ZIP		Channa Maddina
TITIF			6.1 TITLE			☐ Change ☐ Addition

CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

Car. TED NAME OF SIGNING OFFICER OR DIRECTOR