

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

Amend

FILED

Apr 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	--

DOCUMENT # *P94000018661*

1. Corporation Name

MORETTI RACING, INC.

Principal Place of Business	Mailing Address
2100 N.W. 93rd Ave. Miami, Florida 33172	2100 N.W. 93rd Ave. Miami, Florida 33172

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 200 S. Biscayne Blvd.		26 200 S. Biscayne Blvd.		03/10/94		01/15/97	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22 4815		27 4815		65-0475329		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required ☐ \$5.00 May Be Added to Fees	
23 Miami, Florida		28 Miami, Florida		6. Election Campaign Financing Trust Fund Contribution		☐ Yes ☐ No	
Zip		Zip		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		☐ Yes ☐ No	
24 33131		29 33131		30			

9. Name and Address of Current Registered Agent

~~ANGELA C. WILLIAMS~~
~~2100 N.W. 93rd Ave.~~
~~Miami, Florida 33172~~

10. Name and Address of New Registered Agent

81 Name	Piero Salussolia		
82 Street Address (P.O. Box Number is Not Acceptable)	200 S. Biscayne Blvd.		
83 Suite	Suite 4815		
84 City	FL	85 Zip Code	33131

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

Signature, typed or printed name of the registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

03/12/97

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	☐ DELETE	1.1 TITLE	D/P/T	☐ Change ☐ Addition		
NAME	MORETTI, GIANPIERO		1.2 NAME	MORETTI, GIANPIERO			
STREET ADDRESS	VIA DECEMVIRI 20		1.3 STREET ADDRESS	VIA DECEMVIRI 20			
CITY-ST-ZIP	20138 MILANO, ITALY		1.4 CITY-ST-ZIP	20138 MILANO, ITALY			
TITLE	D	☐ DELETE	2.1 TITLE	D/AS	☐ Change ☐ Addition		
NAME	SALUSSOLIA, PIERO		2.2 NAME	SALUSSOLIA, PIERO			
STREET ADDRESS	5555 COLLINS AVE. #7K		2.3 STREET ADDRESS	5555 COLLINS AVE. #7K			
CITY-ST-ZIP	MIAMI BEACH FL 33140		2.4 CITY-ST-ZIP	MIAMI BEACH FL 33140			
TITLE	V	☐ DELETE	3.1 TITLE	VP/S	☐ Change ☐ Addition		
NAME	MOORE, PHILIP		3.2 NAME	MOORE, PHILIP			
STREET ADDRESS	2100 NW 93 AVE.		3.3 STREET ADDRESS	2100 NW 93 AVE.			
CITY-ST-ZIP	MIAMI FL		3.4 CITY-ST-ZIP	MIAMI FL			
TITLE	S	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition		
NAME	WILLIAMS, ANGELA C.		4.2 NAME				
STREET ADDRESS	2100 NW 93 AVE.		4.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

14. I do 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. 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, under an appointment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/12/97 (305) 373-7016

CR2E034 (9/96)