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FILED
Feb 09, 1999 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

02-09-1999 90013 007 ****150.00

DOCUMENT # P94000040298

1. Corporation Name
GRAND PRIX REALTY, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 12794 WEST FOREST HILL BLVD. SUITE 34 WEST PALM BEACH FL 33414
Mailing Address: 12794 WEST FOREST HILL BLVD. SUITE 34 WEST PALM BEACH FL 33414

3. Date Incorporated or Qualified: 05/25/1994
4. FEI Number: 65-0494431
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 owes the current year Intangible Personal Property Tax: Yes

2. Principal Place of Business (21-24) and Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOHNSON, ROBERT E
12794 W. FOREST HILL BLVD.
SUITE 34
WELLINGTON FL 33414

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

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 registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 6 rows for Officers and Directors. Includes fields for Title, Name, Street Address, and City-ST-ZIP. Includes a 'DELETE' checkbox for each row.

Table with 6 rows for Additions/Changes to Officers and Directors. Includes fields for Title, Name, Street Address, and City-ST-ZIP. Includes 'Change' and 'Addition' checkboxes for each row.

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.

SIGNATURE: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: [Signature] DATE: 1/19/99 DAYTIME PHONE #: 561 790-0500

CR2E034 (11/98)