

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000002198

1. Entity Name

HI-FI RACING, INC.

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90065 035 ***150.00

Principal Place of Business

Mailing Address

4302 E 10TH AVE
UNIT 103
TAMPA FL 33605
US

P.O. BOX 669
BRANDON FL 33509-0669
US

2. Principal Place of Business

3. Mailing Address

321 E. ROBERTSON ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BRANDON FL

City & State

BRANDON FL

4. FEI Number

59-3285197

Applied For

Not Applicable

Zip

33511

Country

Zip

33511

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ASHBURN, GEORGE R
4302 E. 10TH AVE
UNIT 103
TAMPA FL 33605

Name

GEORGE R. ASHBURN

Street Address (P.O. Box Number is Not Acceptable)

321 E. ROBERTSON ST

City

BRANDON

FL

Zip Code

33511

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST
NAME ASHBURN, GEORGE
STREET ADDRESS 4302 E. 10TH AVE. UNIT 103
CITY-ST-ZIP TAMPA FL 33605 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 321 E ROBERTSON ST
CITY-ST-ZIP BRANDON FL 33511

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GEORGE R ASHBURN

3/27/00

813.241.0108

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)