

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P95000011869 (1)**

1. Corporation Name

**UNITED RACING ENGINES, INC.**

Principal Place of Business

**777 BRICKELL AVENUE  
SUITE 1114  
MIAMI FL 33131**

Mailing Address

**777 BRICKELL AVENUE  
SUITE 1114  
MIAMI FL 33131**



3. Date Incorporated or Qualified

**02/13/1995**

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 **6073 NW 167 ST.**

26 **SAME**

4. FEI Number

**65-0556999**

Applied For

Not Applicable

22 Suite, Apt. #, etc.

Suite, Apt. #, etc.

23 City & State

City & State

**MIAMI FL**

24 Zip **33015**

25 Country **USA**

29 Zip

30 Country

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**MURTY, STEPHEN G  
MURTY & TOME, P.A.  
777 BRICKELL AVE. SUITE 1114  
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name

**JOHN T. CULLEN**

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

**7411 MIAMI LAKES DR**

83

84 City

**MIAMI LAKES**

85 FL

Zip Code

**33014**

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, 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 of agent or printed name of registered agent and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**3/6/96**

12. OFFICERS AND DIRECTORS

TITLE **PVTS** ☒ DELETE  
NAME **VINCENT LOPEZ JR**  
STREET ADDRESS **8600 ARDOCH ROAD**  
CITY-ST-ZIP **MIAMI LAKES FL 33016**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PVTS** ☐ Change ☒ Addition  
1.2 NAME **PATRICIA H. LOPEZ**  
1.3 STREET ADDRESS **8600 ARDOCH ROAD**  
1.4 CITY-ST-ZIP **MIAMI LAKES, FL 33016**

2.1 TITLE **V** ☐ Change ☒ Addition  
2.2 NAME **VINCENT LOPEZ III**  
2.3 STREET ADDRESS **622 S.W. 158TH TERRACE**  
2.4 CITY-ST-ZIP **PEMBROKE PINES FL 33027-1134**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

**Patricia H. Lopez**

**PATRICIA H. LOPEZ**

**4/8/96**

**(305) 821-3331**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)