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

**CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000026004 (8)

**ULTIMATE MOTOR SPORTS, INC.** 

Principal Place of Business Mailing Address

**FILED** May 01 1997 8:00am Secretary of State



22790 BOUTH DIXIE HIGHWAY MIAMI FL 83170		22790 SOUTH DIXIE HIGHWAY MIAMI FL 33170-6358					
					3. Date Incorporated or Qualified 03/31/1995	3a, Date of 10/24/1	
<del>-</del>	lace of Business	2a. Mailing Address		4. FET Number 65-0572424	.1	Applied For	
Suite, Apt	#. etc.	26			05 0572424		Not Applicable  3.75 Additional
2		27		5. Certificate of Status Desired		Fee Required	
City & State	6	City & State			6. Election Campaign Financing	\$	5.00 May Be
3		28			Trust Fund Contribution		Added to Fees
Zip	Country	<i>Ζ</i> ιρ	Countr	у	8. This corporation has liability for i		
4	9, N. me and Address of Current	[29]	[30]			Yes No	
All IA	VEZ MARILYN	negistered Agent		Namo	10. Name and Address of New Re	Bizretea Agen	
	90 S. DIXIE HWY			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
MAM) FL 33170				Street Address (P.O. Box Number is Not Acceptable)			
<del>qy</del> H/M	m 1 = 4011 4		83				
			rar.			·	
			84	Cily		FL 85	Zip Code
12.	Signature, typed or printed name of registered agent OFFICERS AND	DIRECTORS	13.	er es griature rogei	red when relistating) ADDITIONS/CHANGES TO OFFIC		
12.	OFFICERS AND					ERS AND DIRE	CTORS IN 12
TITLE	PD NUNEZ, RUBEN	☐ DELFTE	1.1 7011.6			∐ 0	hange 🔲 Addition
NAME	22790 SOUTH DIXIE HIGHWAY		1.2 NAME				
STREET ADDRESS  CITY-ST-ZIP	MAMI FL 33170			1 ADDRESS			
TITLE	VD	DELFTE	1.4 CiTY - 2.1 TiTLE	91· (II)			hange Addit.on
NAME	FERNANDEZ, JULIO		2.2 NAME			٠	
STREET ADDRESS	22790 SOUTH DIXIE HIGHWAY			1 ADDRESS			
CITY-ST-ZIP	MIAMI FL 33170		2. 4 CITY-				
TITLE		DELETE	3.4 1011.6	·			hange 🔲 Addition
NAME			3.2 NAME	ŀ			
STREET ADDRESS			3.3 STREE	1 ADDRESS			
CITY-ST-ZIP		D butter	3.4 CITY-				
TITLE   NAME		L DELETE	4.1 Till E	1	70000216 -05/06/970101	6974	nange Addilion
NAME Street address			4. 2 NAME	T ADDRESS	-U5/U5/3(U1U1	30 (R	
CITY-ST-ZIP			4.5 STREE		***8.75	^	
TITLE		DELETE	5.1 Till (	O1 EH	<i>0-m</i>	$\sigma \Box f b$	hange Addition
VAME		•	5.2 NAME		$\mathbf{v}_{i}$	ν, Ξ	A
STREET ADDRESS			5.8 S1HE.E	1 ADDRESS	, , , , , , , , , , , , , , , , , , ,	\	YSHID
CITY-ST-ZIP			5 <b>4 C</b> HY - :	\$1 - 71 <sup>2</sup>	^)		SHAM
TITLE		DELETE	6 1 mlF		otenance		hange Addition
NAME			6.2 NAME		20000216 -05/06/970101		-
STREET ADDRESS			1	LADDRESS	***165 <b>.0</b> 0		
CITY-ST-ZIP			64 CHY-:	ST - 7IP	The state of the s		

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; that I am an officer or director of the co-poration 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 inchanged, or on an attachment with an address.