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PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000029489 (8)

1. Corporation Name

INFINITY OFFSHORE RACING, INC.

Principal Place of Business

5320 NW 10TH TERRACE  
FT. LAUDERDALE FL 33309

Mailing Address

5320 NW 10TH TERRACE  
FT. LAUDERDALE FL 33309-3151

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 Zip

27 City & State

28 Zip

Country

Country

9. Name and Address of Current Registered Agent

MURPHY, TIMOTHY R  
993 EAST OAKLAND PARK BLVD.  
FT. LAUDERDALE FL 33334

*Delete*

81 Name

Joseph M. VAZQUEZ

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

5320 NW 10TH TERR

83

84 City

FT. LAUDERDALE FL

FL 33309

85 Zip Code

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

*X Joseph M. Vazquez* - *President Secretary*

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

(NOTE: Registered Agent signature required when reinstating)

5/12/97

DATE

12. OFFICERS AND DIRECTORS

DELETE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change  Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

PD  
DAVIS, SUZANNE J  
5320 NW 10TH TERRACE  
FT. LAUDERDALE FL 33309

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

VD  
MURPHY, TIMOTHY R  
5320 NW 10TH TERRACE  
FT. LAUDERDALE FL 33309

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

SD  
VAZQUEZ, JOSEPH M  
5320 NW 10TH TERRACE  
FT. LAUDERDALE FL 33309

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

DELETE

DELETE

DELETE

DELETE

DELETE

DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

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

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

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

Change  Addition

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 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: *Suzanne J. Davis* - 4-22-97 950-939-1919

CR2E034 (9/96)