## **2001 UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 25, 2001 8:00 am Secretary of State DOCUMENT # P95000055099 1. Entity Name T & F MOTOR SPORTS, INC. 04-25-2001 90140 043 \*\*\*150.00 Principal Place of Business Mailing Address 2331 N 59TH TERRACE 2331 N 59TH TERRACE HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 . 748158 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0601562 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ⇒ BARRECA, ANTHONY D Street Address (P.O. Box Number is Not Acceptable) 2331 N 59TH TERRACE HOLLYWOOD FL 33021 Zip Code City FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME BARRICA, ANTHONY D STREET ADDRESS STREET ADDRESS 2331 N 59TH TERR CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Delete Change ☐ Addition TITLE ۷P NAME NAME BARRECA, FRANK G STREET ADDRESS STREET ADDRESS 17061 N W 82ND AVE CITY-ST-7IP CITY-ST-ZIP HIALEAH FL ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME .--NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete ☐ Addition TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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.

CITY-ST-ZIP

CiTY-ST-7IP

SIGNATURE:

THE FRANK G. BARRE CA SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/01 305-8152392 Date Daytime Phone #