

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000076347

1. Entity Name

INSPIRE RACING & DEVELOPMENT TEAM, INC.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90035 036 ***150.00

Principal Place of Business

Mailing Address

335 SUNSHINE DR
COCONUT CREEK FL 33066
US

335 SUNSHINE DR
COCONUT CREEK FL 33066-1844
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0618648

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MOGBO, CHUCK
2331 NO. STATE ROAD 7 STE 124
LAUDERHILL FL 33313

Name

MOGBO, CHUCK P.A.

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

2800 W OAKLAND PARK BLVD

Suite # 209

City

OAKLAND PARK

FL

Zip Code

33311

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

2/8/00

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 P ☒ Delete
NAME HORN, HENDRIK
STREET ADDRESS 335 SUNSHINE DR
CITY-ST-ZIP COCONUT CREEK FL

TITLE P ☐ Change ☒ Addition
NAME JENNIFER E. HORN
STREET ADDRESS 335 SUNSHINE DRIVE
CITY-ST-ZIP COCONUT CREEK, FL 33066

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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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:

Jennifer E. Horn

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/2000 (954) 984 9292

Date

Daytime Phone #

CR2E034 (9/99)