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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9600002045 (8)

TOM SHAW'S SPEED INCORPORATED

Principal Place of Business	Mailing Address		
2222 SECOND ST	2222 SECOND ST		
FT MYERS FL 33901	FT MYERS FL 33901-3026		

FILED Apr 01 1997 8:00am Secretary of State



				01/02/1996	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		Applied For	Not Applicab
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stal	le	City & State	111	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Žφ	Country	Zip	Country	8. This corporation has liability for int	tangible tax under s. 199.032.
24	25	29	30		Yes No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Regi	stered Agent
	SINSKI, KEVIN F 2 SECOND ST		81 Name 82 Street	Address (P.O. Box Number is Not Acceptable	3)
	MYERS FL 33901		83	Additional to the transfer of the Additional to	2
			84 City		FL 85 Zip Code
44 6	10001-007.0	100 and 607 1500. Florida Cta	that the should remaid	corporation submits this statement for the pur	
agent. La SIGNATURE	am familiar with, and accept the ob		Florida Statutes. NOTE: Registered Agent signature	required when reinstating)	DATE
12.	OFFICERS A	AND DIRECTORS	J 13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
3)[[[D	DELETE	1.1 TITLE		Change Addition
NAME	SHAW, TOM		1.2 NAME		
STREET ADDRESS	31 NEWSOMB BLYD.		1.3 STREET ADDRESS		
OTY-ST-ZIP	NEW ORLEANS LA 70118		1.4 CHTY-ST-ZIP		
COTY-ST-ZIP	NEW ORLEANS LA 70118	☐ DELETE	1.4 CITY - ST - 7IP 2.1 TITLE		☐ Change ☐ Addition
	NEW ORLEANS LA 70118	☐ DELETE	······		Change Addition
THIT	NEW ORLEANS LA 70118	☐ DELETE	2.1 TITLE	hadd the group of the state of	☐ Change ☐ Addilic
TITLE	NEW ORLEANS LA 70118	☐ DELETE	2.1 TIFLE 2.2 NAME		☐ Change ☐ Addilic
THEE NAME SERRET ADDRESS	NEW ORLEANS LA 70118	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		☐ Change ☐ Addition
THEE NAME STREET ADDRESS ONLY - ST - Z-P	NEW ORLEANS LA 70118	_	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		<u> </u>
THEE NAME STREET ADDRESS ONLY-ST-Z-P THEE	NEW ORLEANS LA 70118	_	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE		<u> </u>
THE NAME STREET ADDRESS OUT -ST-ZP HITCE NAME	NEW ORLEANS LA 70118	_	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		<u> </u>
THRE NAME STREET ADDRESS CHY-SI-ZP THRE NAME STREET ADDRESS	NEW ORLEANS LA 70118	_	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		<u> </u>
THEE NAME STREET ADDRESS OUT-SI-ZP THEE NAME STREET ADDRESS OUT-SI-ZIP	NEW ORLEANS LA 70118	☐ DELETE	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		☐ Change ☐ Additio
THE NAME STREET ADDRESS OBY-SE-ZE THEE NAME STREET ADDRESS OBY-SE-ZIP THEE		☐ DELETE	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		☐ Change ☐ Additio
THE NAME STREET ADDRESS CHY, SE, 7,22 THEE NAME STREET ADDRESS CHY-SE, ZIP THEE NAME		☐ DELETE	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		☐ Change ☐ Addition
THE NAME STREET ADDRESS ONY SETZE THEE NAME STREET ADDRESS ONY SETZE THEE NAME STREET ADDRESS STREET ADDRESS		☐ DELETE	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		☐ Change ☐ Additio
THE NAME STREET ADDRESS ONY-SI-72P THUE NAME STREET ADDRESS ONY-SI-74P THUE NAME STREET ADDRESS ONY-SI-74P THUE NAME STREET ADDRESS ONY-SI-74P		☐ DELETE	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		☐ Change ☐ Addition
THE NAME STREET ADDRESS ONY SETZP THEE NAME STREET ADDRESS ONY SETZP THE NAME STREET ADDRESS ONY SETZP THE STREET ADDRESS ONY SETZP THEE		☐ DELETE	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		☐ Change ☐ Addition
THE NAME STREET ADDRESS CHY SELZE HITE NAME STREET ADDRESS CHY SELZIP THE NAME STREET ADDRESS CHY SELZIP THE NAME STREET ADDRESS CHY SELZIP THE NAME		DELETE	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		Change Addition Addition Change Addition Addition
THE NAME STREET ADDRESS CHY-SE-ZP HAME STREET ADDRESS C-TY-SE-ZIP TITLE NAME STREET ADDRESS CHY-SE-ZIP I-LE NAME STREET ADDRESS		☐ DELETE	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		☐ Change ☐ Addition
THE NAME STREET ADDRESS CHY-SI-ZP THUE NAME STREET ADDRESS CHY-SI-ZIP HUE NAME STREET ADDRESS CHY-SI-ZIP THUE NAME STREET ADDRESS CHY-SI-ZIP FILE NAME STREET ADDRESS CHY-SI-ZIP CHY-SI-ZIP		DELETE	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		Change Addition Addition Change Addition Addition
THE NAME STREET ADDRESS ONY-SE-ZE THEE NAME STREET ADDRESS ONY-SE-ZIP THE NAME STREET ADDRESS ONY-SE-ZIP THE NAME STREET ADDRESS ONY-SE-ZIP THE NAME STREET ADDRESS ONY-SE-ZIP THEE NAME STREET ADDRESS ONY-SE-ZIP THEE		DELETE	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		Change Addition Addition Change Addition Addition

4. 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 path; the Lam 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 appreciate the corporation or on an attachment with an address.

SIGNATURE

NOWWY AND TYPE ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/97

(\$60)74/ 251