

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000039982

1. Entity Name

CONTINENTAL RACERS II, INC.

FILED

Apr 13, 2000 8:00 am  
Secretary of State

04-13-2000 90036 045 \*\*\*150.00

Principal Place of Business Mailing Address  
3000 N. FEDERAL HWY., BLDG. 2, SUITE #200 3000 N. FEDERAL HWY., BLDG. 2, SUITE #200  
FT. LAUDERDALE FL 33306 FT. LAUDERDALE FL 33306-1416

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0674005

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

SANTANGELO, CARL G  
3000 N. FEDERAL HWY., BLDG. 2, SUITE #200  
FT. LAUDERDALE FL 33306

Name

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

City

FL

Zip Code

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

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	D	SANTANGELO, CARL G	3000 N. FEDERAL HWY., BLDG. 2, SUITE #200							
		FT. LAUDERDALE FL 33306								
	D	SIGHT, JAMES W	8500 COLLEGE BLVD.							
		OVERLAND PARK KS 66210								

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:

SANTANGELO, CARL G, SANTANGELO

Date

Daytime Phone #

Res 4/3/00 (954) 561-3040

CR2E034 (9/99)