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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000070521 (5)

FILED May 29 1998 8:00am Secretary of State

M. I. R. MOTORSPORTS, INC. Principal Place of Business Mailing Address XMMEX 4276 Hibiscus Circle 4276 HIBISCUS CIRCLE WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/22/1996 2. Principal Place of Business 2a, Mailing Address 4, FEI Number -083/432 Applied For 21 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Ζiρ Zφ Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MCCOMAS, DONNA F 4276 HIBISCUS CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33409 83 84 City 85 Zip Code F 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 (NOTE: Registored Agent signature required when reinstating) Signature, typod or printed name of registered agreet and title if applicable. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE TITLE MCCOMAS, DONNA F 1.2 NAME NAME **4276 HIBISCUS CIRCLE** STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33409 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ___ Addition 2.1 TITLE TITLE INGRAM, MICHAEL NAME 4276 HIBISCUS CIRCLE 2.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33409 2 4 CITY - ST - ZIF CITY-ST DELETE Addition Change 31 T/TLE TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 4.1 T(TLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITGE 5.2 NAME NAME STREET ADDRESS **53 STREET ADDRESS** 5 4 CITY-ST-7IP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

14. 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.

Michael Ingram, Dir/Pres (5W)683-0295