FILE NOW: FILING FEE AFTER MAY 18T IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P96000084312 (3)

M.A.P. RACING, CORP.

FILED May 15 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address		1 400/1088 130 100/10 08/11 00/11 00/11 00/11 00/11 01/11 01/11 01/11 01/11 01/11 01/11 01/11
362 SW 18TH TERRACE		362 SW 18TH TERRACE		
MIAMI FL 33120		MIAMI FL 33129		DO NOT WRITE IN THIS SPACE
•				3. Date Incorporated or Qualified
				10/11/1996
2. Principal P	lace of Business	2a. Mailing Address	~ ~~	4. FEI Number Applied For
21 /04	<u> 20</u> . S. 10 . 112 S		S.W 72.	
Suite, Apf	#, OIC.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	9	City & State,		6. Election Campaign Financing \$5,00 May Be
23 MIA		28 MIAMI	, FL	Trust Fund Contribution Added to Fees
Zip	Country	7m	Country	8. This corporation owes or has paid the current year Intangible
24 <i>33 </i>	73 25 72		30 VSA	Personal Property Tax due June 30. X Yes No
				10. Name and Address of New Registered Agent
Pedro B Rodriguez				
satisfication and an			Address (P.O. Box Number is Not Acceptable)	
W)	I-MH FL 33128		83	10470 S.W 72 STREET
			94 0	A last 70 Octo
			84 City	Mianti FL BS Zip Code 3.7/73
44 Durament to the provisions of Sections COZ MARS and COZ MARS Elected Statutes the phase parent expression submits this statement for the purpose of changing its registered				
office or registered agent, or both, in the State of Florida State 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. Spection 607.0505, Florida Statutos.				
SIGNATURE Signature, the story parket supplies of impactions agent and their diaglic, hable (NOTE Registered Agent signature depend with a reinstalling) DATE				
Signature, the ed or product registered agent and the if applicable (NOTE Registered Agent's greature required 12. OFFICERS AND DIRECTORS 13.			a required with a reinstation) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TOLE	Change Addition
NAME	RODRIGUEZ, PEDRO B		1.2 NAME	Daheiguez, redno B
STREET ADDRESS	362 SW 18TH TERRACE		1.3 STREET ADDRESS	10470 S.W 72 Street
CITY-ST-ZIP	MIAMI FL 33129		1.4 CITY - ST - ZIP	Miami FL 33173
TITLE	\$ D	☐ DELETE	2.1 TIPLE	Sb Change Addition C
NAME	RODRIGUEZ, MARIA J		2.2 NAME	Rodriguez Maria J 10470 S.W 72 STREET
STREET ADDRESS	362 SW 18TH TERRACE		2.3 STHEET ADDRESS	10470 S.W /2 START
CITY-ST-ZIP	MIAMI FL 33129	DELETE	2. 4 DITY - ST - ZIP	Mi Ami fl 33173
TITLE			3.1 TITLE 3.2 NAME	Change L Adoutor
NAME Street Address			3.2 NAME 3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAMÉ	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		l an ere	5.4 CITY - \$1 - ZIP	
TITLE		L_ DE LE TE	6.1 TITLE	Change Addition
NAME	•		6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
14. I hereby o	ertify that the information supplied will	h this filing does not quality for	the exemption state	ed in Section 119 07(3)(i). Florida Statutes I further certify that the information
indicated	on this annual count or sundamental	aurus report in true and accur	rate and that my pig	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information

4. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, if further certify that the information indicated on this annual report or suppliemental 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 trusted 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.

SIGNATURE:

Redno B Radnia

1-16-98

(305) 598-6444