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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 20 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700003078 (7)

SHANE LEWIS RACING, INC.

14. I hereby certify that the information supplied indicated on this annual report of supplementation of the corporation or the Block 12 or Block 13 if changed or on an analysis.

Barrata Br							
Principal Place of Business 1092 JUPITER PARK LANE BLDG. 100 JUPITER FL 33458		Mailing Address 1092 JUPITER PARK LANE BLDG. 100 JUPITER FL 33458) (I I I I I I I I I I I I I I I I I I	
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	-	
9 Principal I	Place of Puriness	Los Mattes Address			01/06/1997		
2. Principal Place of Business		2a. Mailing Address	h		- /	ed For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				pplicable	
22		27			5. Certificate of Status Desired See Regul		
City & State		City & State			6. Election Campaign Financing \$5.00 Ma		
23		28			Trust Fund Contribution		
Zip	Country	Zip	Zip Country		8. This corporation owes or has paid the current year Intangible		
24	25	29	30		Personal Property Tax due June 30. Yes No		
	9. Name and Address of Curi	ent Registered Agent		Υ	10. Name and Address of New Registered Agent		
	EWIS, SHANE		81	Name			
	92 JUPITER PARK LANE		. 82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	.DG. 100		83				
JU	IPITER FL 33458		53				
			84	City	FL 85 Zip Cod	ie	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508. Florida Statu	tes the above	e-named corr	poration eulomite this statement for the nurses of changing its re	gietorod	
OTICE OF	registered agent, or both, in the Sta am familiar with, and accept the obl	ate of Florida. Such change was	authorized by	v the corpora	tion's board of directors. I hereby accept the appointment as regi	istered	
•	ann familiar with, and accept the ob-	igations or, Section 607.0505, Fi	iorida Statute:	S.			
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NO	TE: Registered Age	ant signature requi	lred when reinstating) DATE		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	V 12	
TITLE	D	☐ DELET E	1.1 TITLE		Change	Addition	
NAME			1.2 NAME			{	
STREET ADDRESS	16264 122ND DR.		1.3 STREET ADDRESS				
CITY-ST-ZIP	JUPITER FL 33478		1.4 CITY - S	T-ZIP].	
TITLE	D	☐ DELETE	2.1 TITLE		Change	Addition	
NAME	LEWIS, CRYSTAL		2.2 NAME				
STREET ADDRESS	16264 122ND DR.		2.3 STREET	ADDRESS			
CITY-ST-ZIP	JUPITER FL 33478		2.4 CITY - S	ST-ZIP			
TITLE		DELETE 3.1			Change	Addition	
NAME			3.2 NAME	-		1	
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP	<u> </u>		3.4. CITY - 9	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP		Devere	4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE		Change	Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET			i	
CITY-ST-ZIP		. Dro cyc	5.4 CITY - S	T-ZIP		1 4 4 8 8	
TITLE		DELETE	6.1 TITLE		Change	Addition	
NAME		^	6.2 NAME				
STREET ADDRESS		/ l	A 3 STREET	ADDRESS I			

with this filling does not/qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ntal 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 observer of trustee impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in