SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

8917 B MAISLIN DRIVE **TAMPA FL 33637**

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000018396 (6)

I & T RACING, INC.

Principal Place of Business

8817 B MAISLIN DRIVE

TAMPA FL 33637

3. Date Incorporated or Qualified 02/24/1997 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Country Zip Country Zιρ 8. This corporation owes or has paid the current year Intengible Personal Property Tax due June 30. Yes No 25 24 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name REIDY, IRVIN 8917 B MAJSLIN DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33637** 63 84 City Zip Code 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: Registered Agent signature required when reinstating) Signalum, typed or printed name of registered agent and title if epolicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 1.1 TITLE DELETE ☐ Change ☐ Addition REIDY, IRVIN NAME 1.2 NAME 8917 B MAISLIN DRIVE STREET ADDRESS 1.3 STREET ADDRESS **TAMPA FL 33637** 1.4 CITY-ST-ZIP CITY-ST-ZIP TITLE 2.1 TITLE Change ... DELETE Addition ERSKINE, TEDDY NAME 2.2 NAME 8917 B MAISLIN DRIVE STREET ADDRESS 2.3 STREET ADDRESS **TAMPA FL 33637** CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change ____ Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE 4.1 TITLE Change DELETE Addition NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP 5.1 TITLE TITLE DELETE ___ Change NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 7.10

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

14. 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 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 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. SIGNATURE:

CITY-ST-ZIP TITLE

CITY-ST-ZIP

STREET ADDRESS

NAME

Ted Erskine

DELETE

July 2 1998

***150.00

60000258601 -07/13/98--01019--025

813.988-2727

Change

CR2E034 (5/98)

FILED

Jul 10 1998 8:00am

DO NOT WRITE IN THIS SPACE

Secretary of State