

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *Page 62*

CORPORATION

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

09-01-UBR

FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # *P97000028810*

1. Corporation Name
WINNERS Circle Motorsport Bar + Grill
6901 Okeechobee Blvd Suite #1
West Palm Beach FL 33411

2. Principal Office Address <i>6901 Okeechobee Blvd</i> Suite, Apt. #, etc. <i>Suite #1</i> City & State <i>West Palm Beach, FL</i> Zip <i>33411</i> Country <i>Palm Beach</i>		3. Mailing Office Address <i>6901 Okeechobee Blvd</i> Suite, Apt. #, etc. <i>Suite #1</i> City & State <i>West Palm Beach, FL</i> Zip <i>33411</i> Country <i>Palm Beach</i>	
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4. Date Incorporated or Qualified To Do Business in Florida *4-1-97*

5. FEI Number *65-0741954* Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☐ **\$8.75 Additional Fee required for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name *Edwin W. Sawdy Sr.* **300003534063** **4**
 Street Address (P.O. Box Number is Not Acceptable) *6901 Okeechobee Blvd Suite #1* **-01/12/01--01008--006**
 Suite, Apt. #, Etc. ******450.00 ****450.00**

City *West Palm Beach* State **FL** Zip Code **33411**

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent _____ Date _____

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	<i>Edwin W. Sawdy Sr.</i>	<i>113 Malaga St</i>	<i>Royal Palm Beach, FL 33411</i>
V Pres.	<i>Lois S. Alexander</i>	<i>7000 Okeechobee Blvd</i>	<i>Royal Palm Beach, FL 33411</i>
Treas.	<i>Edwin W. Sawdy Jr.</i>	<i>113 Malaga St</i>	<i>Royal Palm Beach FL 33411</i>

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10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *Lois S. Alexander* *11-29-00* *(561) 684-0005*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (9/99)

PAGE 2



Winner Circle Motorsports Bar & Grill

Telephone 561-6840005
Fax 561-6843973

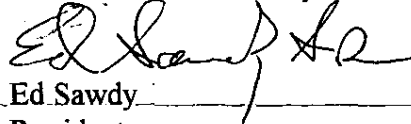
6901 Okeechobee Blvd. suite B1
West Palm Beach FL 33411

NOV 29, 2000

To Whom It May Concern;

I Edwin W. Sawdy Sr at 113 Malaga st Royal Palm Beach FL did not receive the information regarding renewal for our corporation in 1999 or 2000. Please notice the change of address on the new form.

Winner Circle Motorsports Bar & Grill



Ed Sawdy
President