7/23/2002-90337-0

FILED
Sep 23, 2002 8:00 am
Secretary of State
07-23-2002 90337 049 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P 97000037740

1. Entity Name
RACING MANIA INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
9785 S. Orange Blossom	Trail - Same
Suite, Apt. #, etc. D	Suite, Apt. #, etc.
City & State Orlando, Fl.	City & State
Zip 32837 Country	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3452781 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name FRANCISCO SANCHEZ

Street Address (P.O. Box Number is Not Acceptable) 9785 S. ORANGE BLOSSOM TRAIL

City ORLANDO FL Zip Code 32837

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Francisco Sanchez -9785-S.Orange Blossom Trail Orlando, Fl.32837
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANCISCO SANCHEZ _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

MEMORANDUM

TO

FROM 8/21/02

DATE

SUBJECT

MESSAGE

Attachment

[redacted]

#97000037740

42858

Gentlemen

I didn't Received the Card

And I like from you to

forgive for the 400 penalties

My business is small

And I have problems

With my Cash Flow

Thanks a lot

PLEASE REPLY BY NO REPLY NECESSARY

Adams 9042

MEMORANDUM