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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000048517 (1)

MOTORSPORTS FOR KIDS, INC.

Principal Place of Business Mailing Address

FILED May 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
30600 S.W. 152 AVENUE 30600 S.W. 152 AVENUE						
LEISURE CIT	/ FL 33033	LEISURE CITY FL 33033				DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified	
						05/30/1997
2. Principal Pt	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For
21		26				65-0762738 Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22		27				Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23						Trust Fund Contribution Added to Fees
Zip			—	riu y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	25 9. Name and Address of Current	29 Agent	30			10. Name and Address of New Registered Agent
.IO	RDAN, WILLIAM J			B1	Name	
	800 S.W. 152 AVENUE				1	
	SURE CITY FL 33033			82	Street Addr	ress (P.O. Box Number is Not Acceptable)
-	SOME SITTLE SOCIO			83		
				B4	City	FL 85 Zip Code
44 0	A harman of Continue CO7 0500	2 and CO7 1509 Elorida Statu	ton the of	201/0	named core	poration cubmits this statement for the purpose of changing its registered
11. 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 Signature, typed or printed hanne of registere-Lagent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE .						
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD DELETE		1.1 TI	1.1 TITLE		☐ Change ☐ Addition
NAME	JORDAN, WILLIAM J		1.2 N			
STREET ADDRESS	30600 S.W. 152 AVENUE	1.		1.3 STREET ADDRESS		l
CITY-ST-ZIP	LEISURE CITY FL 33033		1.4 CI	1.4 CITY-ST-ZIP		
TITLE	STD DELETE		2 1 TI	2 1 TITLE		Change Addition
NAME	JORDAN, BONNIE J		2.2 N/	2.2 NAME 2.3 STREET ADDRESS		·
STREET ADDRESS	30600 S.W. 152 AVENUE		2.3 ST			
CITY-ST-ZIP	LEISURE CITY FL 33033			2. 4 CITY - ST - ZIP		
TITLE	[] DELETE			3.1 TITLE		Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		I - ZIP	Change Addition
TITLE	בי טבנכונ			4.1 IIILE : 4.2 NAME		
NAME OTROCT ADDRESS					ADDDECC	
STREET ADDRESS				4.3 STREET ADDRESS 4.4 City-St-Zip		
CITY-ST-ZIP TITLE		☐ DELETE	5.1 Tr		- 211	Change Addition
NAME			5.2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP	•					
TITLE			6.1 Ti	CiTY-ST-ZIP TiTLE Change Additio		
NAME		<u> </u>	6.2 N/			
STREET ADDRESS			1		ADDRESS	
CITY-ST-ZIP			1	1Y-ST		
14. I hereby o	ertify that the information supplied wi	th this filing does not qualify	for the exe	empt	ion 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.