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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000066638 (2)

WHITE MOTOR SPORTS, INC.

Principal Place of Business		Mailing Address		L ORDINOS AND IDASA ADDIA DONIA DONIA DONIA DENIA BASAR DASAD BASAD ARADA ADDA ADDA
1363 WILLIAMS DRIVE		1363 WILLIAMS DRIVE		
CLEARWATER FL 33764		CLEARWATER FL 33764		DO NOT WRITE IN THIS SPACE
				3, Date Incorporated or Qualified
				08/01/1997
2 Principal	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-3460136 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		SR 75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year intangible
24	25	29 30	0]	Personal Property Tax due June 30. Yes No
				10. Name and Address of New Registered Agent
AMERICAVIER CHARIERED				sarv to White
343 ALMERIA AVENUE			82 Street Ad-	dress (PIO. Box Number is Not Acceptable)
CORAL GABLES FL 33134			83	363 Williams DRIVE
	,		84 City	Parw Ater FL 85 3376
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				
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 507.0505, Florida Statutes.				
SIGNATURE Stockive, typed or printed who of rights taken and face if applicable (NOTE: Registered Agent signature required when reinstating) DATE DATE				
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE	L_J Change L_J Addition
NAME	WHITE, GARY K		1.2 NAME	
STREET ADDRESS			1.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 33764	DELETE	1.4 CITY-ST-ZIP	Change Addition
TITLE	STD MAINTE CHIEV	□ DELETE	21 TITLE	E change I southou
NAME	WHITE, CINDY 1363 WILLIAMS DRIVE		2.2 NAME	
STREET ADDRESS	CLEARWATER FL 33764	į	2 3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWAIER FL 33/04	DELETE	2.4 CHY-ST-ZIP	Change Addition
TITLE			3.1 TITLE 3.2 NAME	ET cuando ET vaduion
NAME CTOCCT ADORESC			3.2 NAME 3.3 STREET ADDRESS	
STREET ADDRESS		:	1	
CITY-ST-ZIP	<u> </u>	DELETE	3.4. C/TY-ST-Z/P 4.1 T/TLF	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		•	4.4 City-St-Zip	
TITLE		DELETE	5.1 TILE	Change Addition
NAME			5.2 NAME	
		l	i i	
TITLE	· -	☐ DELETE	6.1 TITLE	Change Addition
STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 HILE	L_J Change L_J Addition

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 supplemental annual report is true and accurate and that my signature shall have the same tegal 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.

FILED

Apr 10 1998 8:00am

Secretary of State