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

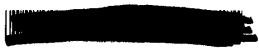
DIVISION OF CORPORATIONS

DOCUMENT # **P97000070877 (0)**

WHITE STALLION MOTORSPORTS; INC. Productions

N/C 2/24/98

FILED Jul 21 1998 8:00am Secretary of State



		·				
Principal Plac	e of Business	Mailing Address	0016 6	0		
1053 VAN AF		1053 VAN ARSDALE 4	056 64 gerl	7 05€		
OVIEDO FL 32765			0 L PI	DO NOT WRITE IN THIS SPACE		
שואוני			er Park, FI	9. Data leastspread of Qualified		
			3279	08/15/1997		
2. Principal P	lace of Business _	2a. Mailing Address		4. FEI Number	Applied For	
	Gilder Rose Place		ar Place	- 59-3467786	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<u>, , , , , , , , , , , , , , , , , , , </u>		75 Additional	
22		27		I & Lightheata of Status Lightner I I I I	e Required	
City & State		City & State		6. Election Campaign Financing \$5	.00 May Be	
23 Winte	clark Fl	28 Winterlark	FL		ded to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current ye	ar Intangible	
24 32792	2 25 US	29 32792	30 US	Personal Properly Tax duo June 30. Yes	∐ No	
	Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent		
	SH i nsky, gary		81 Name	u Lachineku		
	53 YAN ARSDALE		82 Street	Address (P.O. Box Nurliber is Not Acceptable)		
OV	1EDO FL 32765		4056	6 Gilder Rose Place		
•	ı		83			
			84 City		Zip Code	
			1.7.	terlark. FLII:	72792	
11. Pursuant	to the provisions of Sections 602 0502	and 607.1508, Florida Statut	es, the above-named	corporation submits this statement for the purpose of chang	ing its registered	
agent. I a	m tamiliar with, and accept the obligat	ions of Section 607.0505, Fl	orida Statutes	corporation submits this statement for the purpose of chang poration's board of directors. I hereby accept the appointment 112/9	./	
SIGNATURE					7	
			E: Registered Agent signature		7500 00 40	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT		
TITLE	D Lashinsky, gary	L] DECEMB	1.1 TITLE	D Kind of the Control	inde [11] Modition	
NAME	1053 VAN ARSDALE		1.2 NAME	Loshinsky, Gary 4056 Gildor Rose Place		
STREET ADDRESS			1.3 STREET ADDRESS	4056 Gilder Kose Financia		
CITY-ST-ZIP	OVIEDO FL 32765	DELLTE	1.4 CITY - ST - ZIP 2.1 TITLE	Winter Park, 71 32797	nge Addition	
TITLE	LASHINSKY, ELIZABETH A	mme		·	inge L_1 Abdition	
NAME	1053 VAN ARSDALE		2.2 NAME	Loshinsky Elizabethfl 4056 Gilder Rose Place		
STREET ADDRESS	OVIEDO FL 32765		2.3 STREET ADDRESS	1006 Giller Kose Frace		
CITY-ST-ZIP THLE	OVIEUU PL 32/05	DELETE	2.4 CHY-ST-ZIP 3.1 HTLE	Winter Park, F1 32792	nge Addition	
			3.2 NAME		rigo [_] Addition	
NAME						
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	Cha	nge Addition	
NAME		L MICH	4. 2 NAME	المال المال		
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	□ Chá	inge Addition	
NAME		Land Color II	5.2 NAME			
Y			5,3 STREET ADDRESS	500002594535 -07/21/3801092048		
STREET ADDRESS				***\$58.75		
CITY - ST - ZIP TITLE		DELETE	5.4 City - \$1 - ZiP 6.1 Title	Cha	nge Addition	
NAME		Land Section	6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS		12	
					~ VI/	
CITY-ST-ZIP	actify that the information a muliad with	this files does not countify to	6.4 CITY - S1 - ZIP	od in Section 119 07/3/G/ Florida Statutes I further certify the	The section	

I nereby 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 Normation indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.