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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999

DOCUMENT # P97000094304

Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90130 035 ***150.00

WORLD	CLASS RACING INC.							
Principal Place of Business Mailing Address						r 10051002 tilb 10191 (0011 0011 0011 0011 0011	IBIII HINNA I	
1301 EAU GALLIE BLVD 1301 EAU GALLIE BLVD								
106 106						DO NOT WRITE IN THIS	SPACE	
MELBOURNE FL 32935 US MELBOURNE FL 32935 US						3. Date Incorporated or Qualifed		
05						11/03/1997		
Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For
21 26 26						59-3476278		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.								Additional
27						5. Certifcate of Status Desired	Fee	Required
City & State City & State				-		6. Election Campaign Financing	\$5. 0	0-May-Be=====
23		28				Trust Fund Contribution	Adde	d to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year In		_
24	25	29	30			Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered	Agent	
1100	NOV KEDDY E			81	Name		`	
MCCOY, JERRY E				82	Street Add	Address (P.O. Box Number is Not Acceptable)		
A-2-1	1 EAU GALLIE BLVD #106	Q_Deu	<i>ETY</i>					
(#D	BOURNE FL 32935			83				
MEL	BOURNE PL 32933			84	City		85 Z	p Code
				ļШ		poration submits this statement for the purpose of		W
office or r	registered agent, or both, in the State am familiar with, and accept the oblig	ations of, Section 607.0505, Flori	tnonzed da Stat	utes.	ne corporati	on's board of directors. I neterly accept the appo	intment as	registered
	Signature, typed or printed name of registered age		<u> </u>	Agent	signature require	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AF	ID DIREC	TORS IN 12
12.	OFFICERS AND DIRECTORS D			13.		ADDITIONS/CHANGES TO OFFICERS A	[] Chang	
TITLE	MCCOY, JERRY E						_ `	
NAME	JANA EAST ONLINE BLUB HANG	•	1		ADDRESS			
STREET ADDRESS	MELBOURNE FL 32935	•		ITY-ST-				
CITY-ST-ZIP TITLE				TLE			Chang	e Addition
NAME				22 NAME				ì
STREET ADDRESS					ADDRESS			
				ITY-ST				,
CITY-ST-ZIP TITLE		☐ DELETE	3.1 71				Chang	je Addition
NAME			3.2 N	AME				
STREET ADDRESS	1		3.3 ST	TREET	ADDRESS			
CiTY-ST-ZIP			3.4. C	ITY-ST	-ZIP			
TITLE		☐ DELETE	4.1 TI	TLE			☐ Chang	ge
NAME	1		4. 2 N	IAME				
STREET ADDRESS			4.3 S	TREET	ADDRESS			
CITY-ST-ZIP			4.4 CI	ITY-ST-	ZIP			
TITLE		☐ DELETE	5.1 Ti	TLE			Chang	ge 🗌 Addition
NAME			5.2 N	AME				
STREET ADDRESS			5.3 S	TREET	ADDRESS			ł
CITY-ST-ZIP				ITY-ST	ZIP			
TITLE		☐ DELETE	6.1 TI				☐ Chan	ge 🗌 Addition
NAME			6.2 N					
STREET ADDRESS			6.3 S	TREET	ADDRESS			[
CITY-ST-ZIP	1		6.4 CI	ITY-ST-	ZIP			

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 legal effect as if made under oath; that I am an officer or director of the dorporation 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, with all other like empowered.

SIGNATURE;