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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000108006**

BDY MOTORSPORTS, INC.

Principal Place of Business	Mailing Address
7707 ROLLO BLVD.	7707 ROLLO BLVD.
MILTON FL 32583	MILTON FL 32583

Mar 14, 1999 8:00 am Secretary of State

03-14-1999 90040 019 ***150.00



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Principal Place of Business Mailing Address				- C FARTION III INDII HANI ANDII ONDIII ISDIA	MBI BI IMILI BALL	il dibinit diri radi		
7707 ROLLO BLVD. 7707 ROLLO BLVD. MILTON FL 32583 MILTON FL 32583								
					DO NOT WRITE IN THIS	SPACE		
						Date Incorporated or Qualifed		
						01/01/1998		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Α	applied For
21	acc of Basiless	26				59-3484296		lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75	Additional
22	¬					5. Certificate of Status Desired	Fee F	Required
City & State	8	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added	to Fees
Zip	Zip Country Zip Cou		_ Country	•		8. This corporation owes the current year Ir		1
24	25	29 31	<u>) </u>			Personal Property Tax.	Yes	No
	9. Name and Address of Curre	nt Registered Agent	81	Nai		10. Name and Address of New Registered	Agent	
വവ	PER, ROBERT		01	INAI	116			
	ROLLO BLVD.		82	Stre	et Addre	ss (P.O. Box Number is Not Acceptable)		
MILTON FL 32583			83	-				
*******	O14 1 E 02000,		03					
			84	City	/	FI	85 Zip	Code
44	to the second of the storm 607.05	D2 and 607 1609 Elorida Statutas	the above	0-020	ed corno	ration submits this statement for the purpose of	= f.changing if	s registered
office or r	enistered agent or both in the State	e of Florida. Such change was auth	nonzed by	the c	orporation	n's board of directors. I hereby accept the appo	intment as r	egistered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Florid	a Statutes					
SIGNATURE	Signature, typed or printed name of registered ag	ant and his d applicable. (A)OTE: Pr	wistered Age	at sional	harimen enuited	when reinstating) DATE		
12.		ND DIRECTORS	13.	n signa	rote tedamed	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE				Change	Addition
NAME	COOPER, ROBERT		1.2 NAME					
STREET ADDRESS	7707 ROLLO BLVD.		1.3 STREET ADDRE		ESS			1
CITY-ST-ZIP	MILTON FL 32583		1.4 CITY-S	T-ZIP	-			
TITLE	V	☐ DELETE	2.1 TITLE				☐ Change	Addition
NAME	COLLEY, T E		2.2 NAME					
STREET ADDRESS	819 ORIOLE STREET		2.3 STREET A		ESS			
CITY-ST-ZIP	MILTON FL 32570		2. 4 CITY-5	ST-ZIP				
TITLE	T	☐ DELETE	3.1 TITLE				☐ Change	e ☐ Addition
NAME	COOPER, MARGARET		3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDR	E S S			
CITY-ST-ZIP	MILTON FL 32583		3.4. C/TY-5	ST-ZiP				
TITLE	S	☐ DELETE	4.1 TITLE				Change	e Addition
NAME	COLLEY, DENISE		4, 2 NAME					
STREET ADDRESS			4.3 STREET ADORESS		ESS			
CITY-ST-ZIP	MILTON FL 32570		4.4 CITY-ST-ZIP				1977/77	
TITLE	D	☐ DELETE	5.1 TITLE		1		☐ Change	e ☐ Addition
NAME	SOMERSET, JIMMIE		5.2 NAME					
STREET ADDRESS	10140 SOMERSET LANE		5.3 STREE	TADOR	ESS			
CITY-ST-ZIP	MILTON FL 32583		5.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE		ļ		☐ Change	Addition
NAME			6.2 NAME		į			
STREET ADDRESS			6.3 STREE	TADOR	ESS			.]
	l .		A 4 DITE : -		1			I

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 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, with all other like empowered. CITY-ST-ZIP

SIGNATURE: