

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000004393

1. Entity Name

BRANDON MOTORSPORTS, INC.

FILED
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90144 036 ***150.00

Principal Place of Business	Mailing Address
1022 SOUTH 50TH STREET TAMPA FL 33169	P.O. BOX 1450 BRANDON FL 33509-1450 SAME

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	1022 S. 50TH ST
City & State	City & State TAMPA, FL
Zip	Country
33619	USA



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0805585** | Applied For
| Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

MCINTYRE, CHARLES S
1022 SOUTH 50TH STREET
TAMPA FL 33169

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL | Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																								
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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles S McIntyre
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #