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

**PROFIT CORPORATION** ANNUAL REPORT

1999

SPEEDSTER MOTORCARS, INC.

1. Corporation Name



DOCUMENT # P9800007850

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90145 040 \*\*\*150.00

Principal Place of Business Mailing Address							
7905 LEO KIDD AVE. 7905 LEO KIDD AVE.							
		PORT RICHEY FL 34668					
					DO NOT WRITE IN TH	IIS SPACE ,	
					3. Date Incorporated or Qualifed 02/01/1998		ļ
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21	•	26			59-3489158	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	Additional
27		27			5. Certificate of Status Desired	Fee Re	quired
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Country		8. This corporation owes the current year		_
24	25	29 3	0		Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Register	ed Agent	
AKIN	C MICHAEI		81	Name	hael Akins		
AKINS, MICHAEL 18923 TITUS RD.			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
				9210	Turkey Shoot Rd		
HUDSON FL 34667			83		5		
			84	City		. 85 Zip C	Code
				New		·L   37	654
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 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Agen	t signature require	d when reinstating) DATE		5 ·
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE			K Change	Addition
NAME	AKINS, MICHAEL		1.2 NAME		_		
STREET ADDRESS	421 COBBLESTONE DR.		1.3 STREET	ADDRESS 9	210 Turkey Shoot Rd	[	
CITY-ST-ZIP	SPRING HILL FL 34606		1.4 CITY-ST	-ZIP 🙏	210 Turkey Shoot Rd Jew Port Rickey Fl	34654	
TITLE	D	DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	SPEAKMAN, C. WAYNE	•	2.2 NAME				
STREET ADDRESS	7393 ROYAL OAK DR.		2.3 STREET	ADDRESS			1
CITY-ST-ZIP	SRING HILL FL 34607		2.4 CTY-\$	T-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				-
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-S	}	•		
TITLE		☐ DELETE	4.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	☐ Addition
NAME			4 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST				
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME		_	5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			į
			5.4 CITY-S1				
CITY-ST-ZIP TITLE	<del></del>	☐ OELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				_ `
STREET ADDRESS			6.3 STREET	ADDRESS			
	•		6.4 CITY-ST				
CITY-ST-ZIP			J., J., 1-31				

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.

SOUND BEE REQUIRED SIGNATURE: X SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #