## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE APPLICATION -Katherine Harris **FOR** Secretary of State 02 MAY 31 PM 1:16 REINSTATEMENT DIVISION OF CORPORATIONS P98000027764 DOCUMENT # SECRETARY OF STATE FALLAHASSEE, FLORIDA

1. Corporation Name

RETRO MOTORSPORTS, INC.

Principal Place of Business

Mailing Address

6814 SOUTH MACDILL AVE TAMPA FL 33611

6814 SOUTH MACDILL AVE

TAMPA FL 33611

If above addresses are incorrect in any way, line through incorrect information and enter correction below.								
New Principal Office Address, If Applicable			New Mailing Office Address, If Applicable			4. Date Incorporated or Qualified To Do Business in Florida 03/23/1998		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5 FFI Number			
City & State			City & State		50-3501204 Applied For		Not Applicable	
Zip	Country	-Z-		Country	6. CERTIFICAT	EOF STATUS DESIRED	5 Additional Fee required	
7 Namos	and Street Addresses of Ea	ch Officer and/or Dire	otor (Elorida nanna)	fit comparations must list at 1			r a Certificate of Status	
7. Names		of Officers	ctor (Florida rionpro	Street Address of Ea	-	T		
Title(s)	and/or Directors		3	Officer and/or Director		City / State / Zip		
P .	WAGNER, LAWRENCE C		2109 BAYSHORE BLVD.		-"	TAMPA FL 33606		
						201.25	-AR	
						10.00	-ARAKT -ARSUPP	
						88,75	-ARSUPP	
					00	00057633	9106	
			,			-06/12/02:-01 ****300.00		
8. Name and Address of Current Registered Agent					9. Name and	9. Name and Address of New Registered Agent		
PEASE, THOMAS E 29605 US HWY 19 NORTH, SUITE 130				Name	Name  Street Address (P.O. Box Number is Not Acceptable)  Suite_Apt. #. Etc.  City  State Zip Code			
				Street Address				
				Suite, Apt. #, Et				
				City				
10. I, being Signature of Registered		$\alpha$		amiliar with and accept the o	obligations of Sect	5 /23	10-2	

11. I certify that I am an office lost director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

EGISTERED AGENT MUST SIGN

PRONTO C. VACNOZ 4.2.02

20FZ

## Retro Motorsports, Inc.

6814 S. MacDill Avenue, Tampa, Florida 33611

April 26, 2002

Division of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, Florida 32314-6327

To Whom It May Concern:

I, Lawrence Wagner, President of Retro Motorsports, Inc. recently learned that our Corporate status had been dissolved due to the non-filling of the "Uniform Business Report"

I am writing this letter to inform the Department of State that while we have received the "Notice of Administrative Dissolution or Revocation" package, we never received our "2001 Uniform Business Report" or any notices thereof. I honestly believe that had we received the "Uniform Business Report" we would had completed said form and remitted with any fees or dues applicable as we have every year since our beginning in March 1998.

Per my phone call with Kathy on 4/26/02, I have completed "Application for Reinstatement" and included check in the amount of \$ 300.00 and this letter of explanation. If you have any questions, please feel free to call me at 813-831-0922

Sinceref

Larry Wagner President 6814 S. MacDill Avenue Tampa, Florida 33611