

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Aug 10, 1999 8:00 am**  
**Secretary of State**

08-10-1999 90017 044 \*\*\*158.75

DOCUMENT # **P98000041425**

1. Corporation Name

**KARTSPEED, INC.**



Principal Place of Business

**12328 S.W. 94TH TERR  
MIAMI FL 33186**

Mailing Address

**12328 S.W. 94TH TERR  
MIAMI FL 33186**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**05/07/1998**

2. Principal Place of Business

**4479 SW 75 Ave**

2a. Mailing Address

**4479 SW 75 Ave**

4. FEI Number

**65-0834275**

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

City & State

**Miami FL**

City & State

**Miami FL**

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

Zip

**33155**

Country

**USA**

Zip

**33155**

Country

**USA**

8. This corporation owes the current year  
Intangible Personal Property. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**DENIS, CARL P  
12328 S.W. 94TH TERR  
MIAMI FL 33186**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

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: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE  
NAME **DENIS, CARL P**  
STREET ADDRESS **12328 S.W. 94TH TERR**  
CITY-ST-ZIP **MIAMI FL 33186**

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-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 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.

SIGNATURE:

**Signature and Typed or Printed Name of Signing Officer or Director**  
**Signature and Typed or Printed Name of Signing Officer or Director**

**8/30/99**

Date

**305-265-3232**

Daytime Phone #

CR2E034 (5/99)

P98000041425  
603628-90017-44

Kartspeed, Inc.  
12328 SW 94<sup>th</sup> Terrace  
Miami, Florida 33186

July 30, 1999

Division of Corporations  
Annual Reports Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Dear Sir or Madam:

A few weeks ago I received a notice of Annual Reports Filing from the Florida Department of State. I did not take action because the document advised (on the front page) to disregard the notice if the return had been filed. I thought maybe my return had crossed paths with the notice. Seeing the end of the month approaching, I contacted your office only to find that they had not yet received my return.

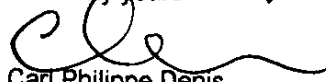
I contacted my bank that confirmed that the check had not been cashed and that the sequence number had been missing since the May statement.

The original return was filed on April 21, 1999 with check # 1083, and had been mailed with. I have also enclosed a copy of my original filing form.

I am forwarding with this letter another check and new copy of the annual report in hopes that you will waive the penalty fee.

If you have any questions please feel free to contact me at 305-265-3232. Thank you for your help.

Sincerely yours

  
Carl Philippe Denis  
Kartspeed, Inc