

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000090838

1. Entity Name

RACING ZONE MOTORSPORTS INC.

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90084 009 ***158.75

Principal Place of Business

Mailing Address

17240 NW 64TH AVE
STE 205
MIAMI FL 33015

17240 NW 64TH AVE
STE 205
MIAMI FL 33015-6304

2. Principal Place of Business

7880 WEST 20th AVE

3. Mailing Address

7880 WEST 20th AVE

Suite, Apt. #, etc.

SUITE # 45

Suite, Apt. #, etc.

SUITE # 45

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33016

Country

USA

Zip

33016

Country

USA

4. FEI Number

65-0868875

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARTIN, NESTOR
17240 NW 64TH AVE
STE 205
MIAMI FL 33015

Name

NESTOR MARTIN

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

20727 NW 1st Street

City

PEMBROKE PINES

FL

Zip Code

33029

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

TITLE P ☐ Delete
NAME NESTON, MARTIN
STREET ADDRESS 17240 NW 64TH AVE #205
CITY-ST-ZIP MIAMI FL 33015

TITLE ☒ Change ☐ Addition
NAME NESTOR MARTIN
STREET ADDRESS 20727 NW 1st ST
CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE VP ☐ Delete
NAME GORIS, MYRIAMA
STREET ADDRESS 17240 NW LATH AVE #205
CITY-ST-ZIP MIAMI FL 33015

TITLE ☒ Change ☐ Addition
NAME MYRIAM GORIS
STREET ADDRESS 20727 NW 1st ST
CITY-ST-ZIP PEMBROKE PINES, FL 33029

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME MARIA A. ORTIZ
STREET ADDRESS RIO CAYAS D-29, RIO HONDO
CITY-ST-ZIP BAYAMON, PR 00961

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME JOSE R. MARTIN
STREET ADDRESS RIO CAYAS D-29, RIO HONDO
CITY-ST-ZIP BAYAMON, PR 00961

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/20/2000 (305) 231-9992

CR2E034 (9/99)