FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachmen

Feb 01, 2001 8:00 am Secretary of State DOCUMENT # P98000091799 1. Entity Name AUTO RACE INDUSTRIES OF PALM BEACH INC. 02-01-2001 90149 021 ***150.00 Principal Place of Business Mailing Address 2870 ANIETAN LANE 2870 ANIETAN LANE WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 912181 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0872336 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registers 7. Name and Address of New Registered Agent Name KIESLING, ROBERT A 1101 NORTH CONGRESS AVENUE STE 204 **BOYNTON BEACH FL 33426** entity sub ts this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE D, P, S NAME SANCAVICH, ROBERT J Robert J. Stancavich STREET ADDRESS STREET ADDRESS 2870 ANIETAN LANE CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33409 TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP -TITLE TITLE Change ☐ Delete ☐ Addition. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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