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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000094596

1. Corporation Name

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90026 034 ***150.00

VIVECA	AVERSTEDT RACING, INC.										
Principal Place of Business Mailing Address						i / !!! !	INNUL KUU ININU KUVII UNIIK I	1811) (181 1) (1814)	TERE BY BIT BEILD	16119 9111 1681	
3122 TERRY BI											
3122 TERRY BROOK DRIVE 3122 TERRY BROOK DRIVE SUITE 508											
WINTER PARK FL 32792 WINTER PARK FL 32792						DO NOT WRITE IN THIS SPACE					,
							orporated or Qualifed	j			
						11/09/1					1
2. Princip al Place of Business 2a. Mailing Address						4. FEI Numi		i		olied For	
21 26						59-	355 6509	'		: Applicable	
Suite, Apt. #, etc.						5 Certifcate	of Status Desired		\$8.75		
22 27									Fee Re	·	
City & State City & State						ļ.	Campaign Financing		\$5.00		
23 28						Trust Fun	d Contribution		Added t	o Fees	4
Zip Country Zip			Coun	try		,	oration owes the cu	rrent year Inta	_	-d.	
24	25		30				Property Tax.		<u>Yes</u>	No .	1
	9. Name and Address of Current	Registered Agent		NA (NI		10. Name ar	nd Address of New	Registered A	Agent		1
Δ\/EI	RSTEDT, VIVECA		- 1	Nam	е						
3122 TERRY BROOK DRIVE			1	32 Stree	t Addres	ss (P.O. Bo) N	umber is Not Accep	table)			1
			L.								1
SUITE 508 WINTER PARK FL 32792] {	3							1
****	IER FARN FE 32/32		 	4 City					85 Zip (ode	1
L								F <u>L</u>	11]
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes	s, the abo	ove-name	d corpor	ration submits t	this statement for the	e purpose of c	changing its	registered extered	ĺ
agent. la	m familiar with, and accept the obligat	ons of, Section 607.0505, Flori	da Statut	es.	port don	S Doard Of Cire	sciors. Thereby acce	the abtoile	unent bo re	3.010.00	
SIGNATURE											
	Signature, typed or printed name of registered agent			gent signatur	e required v	vhen reinstating)		DATE			6
12.	OFFICERS ANI		13.			ADDITICIN	S/CHANGES TO O	FICERS AND			(11/98)
TITLE	D DELETE		1.1 TITLE 7		1.7.	V and lad b	Hakan		☐ Change	Addition	
NAME AVERSTEDT, VIVECA			1.2 NAME			ENSTEUT	Hakan	~			CR2E034
STREET ADDRESS 3122 TERRY BROOK DRIVE SUITE 508			1.3 STREET ADDRESS 3			2 lerry	Brook Dr. Bark, FL 3	Suite so	28		Į Į
CITY-ST-ZIP	WINTER PARK FL 32792		1.4 CITY	-ST-ZIP	$\perp \nu$	inter 1	ark, FL 3	12192	_		<u>}</u>
tшrε.		☐ DELETE	2.1 TITU						Change	Addition	١
NAME	221		2.2 NAM	E							
STREET ADDRESS	DORE: S		2.3 STREET ADDRESS		s∤						
CITY-ST-ZIP		- 	2. 4 CITY- ST- ZIP		<u> </u>						
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NAME			3.2 NAME								
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CITY-ST-ZIP				-ST-ZIP							
TITLE	DELETE 4.11		4.1 TITLE	<u> </u>	}				Change	Addition	{
NAME	4		4. 2 NAN	E							
STREET ADDRES 3	REET ADDRES 3		4.3 STREET ADDRESS		s						
CITY-ST-ZIP			44 CITY	-ST-ZIP							
τιπιε		☐ DELETE							Change	☐ Addition	
NAME			5.2 NAM	5.2 NAME							1
STREET ADDRESS	ADDRESS		5.3 STR	5.3 STREET ADDRESS							
CITY-ST-ZIP			5.4 CITY	5.4 CITY-ST-ZIP]
TITLE			6.1 TITLE	6.1 TITLE					☐ Change	Addition	
NAME			6.2 NAM	E							
STREET ADDRESS			6.3 STRI	ET ADDRES	s						[
ı			C 4 CITY	-ST-ZIP							

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(\$)(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 are an officer or director of the corporation or the receiver or trustee empowered to be equippled report as required by Chapter 307, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or op an attachment with an address, with fall office in the empowered.

SIGNATURE: