

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

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PROFIT CORPORATION ANNUAL REPORT 1999



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

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90143 050 \*\*\*150.00

DOCUMENT # P98000105021

1. Corporation Name INSPIRATIONAL RACING, INC.



Principal Place of Business: 10150 BELLE RIVE BLVD., #1907 JACKSONVILLE FL 32256
Mailing Address: 10150 BELLE RIVE BLVD., #1907 JACKSONVILLE FL 32256

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified: 12/17/1998
4. FEI Number: 59-3548067
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business (crossed out)
2a. Mailing Address (crossed out)
21. Suite, Apt. #, etc. (crossed out)
22. City & State (crossed out)
23. Zip (crossed out)
24. Country (crossed out)
25. Country (crossed out)
26. Suite, Apt. #, etc. (crossed out)
27. City & State (crossed out)
28. Zip (crossed out)
29. Country (crossed out)
30. Country (crossed out)

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DOYLE, GREGORY C
10150 BELLE RIVE BLVD., #1907
JACKSONVILLE FL 32256

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: FL

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

Table with columns for Title, Name, Street Address, City-ST-ZIP. Includes entry for Doyle, Gregory C.

Table with columns for 1.1 Title, 1.2 Name, 1.3 Street Address, 1.4 City-ST-ZIP, 2.1 Title, 2.2 Name, 2.3 Street Address, 2.4 City-ST-ZIP, 3.1 Title, 3.2 Name, 3.3 Street Address, 3.4 City-ST-ZIP, 4.1 Title, 4.2 Name, 4.3 Street Address, 4.4 City-ST-ZIP, 5.1 Title, 5.2 Name, 5.3 Street Address, 5.4 City-ST-ZIP, 6.1 Title, 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, with all other like empowered.

SIGNATURE:

SIGNATURE (REQUIRED)

4.23.99

(904-641-2739)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)