

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P99000020429

Entity Name: MOTORSPORTS AMERICAS, INC.

**FILED**  
**Oct 30, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

2901 PONCE DE LEON AVE  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

4400 NORTHCOPR PKWY  
PALM BEACH GARDENS, FL 33410 US

**Current Mailing Address:**

2901 PONCE DE LEON AVE  
CORAL GABLES, FL 33134

**New Mailing Address:**

4400 NORTHCOPR PKWY  
PALM BEACH GARDENS, FL 33410 US

FEI Number: 65-0904873

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

YANOWITCH, PETER J  
232 ANDALUSIA AVE STE 350  
MIAMI, FL 33134 US

**Name and Address of New Registered Agent:**

JAMISON, PETER  
4400 NORTHCORP PKWY  
PALM BEACH GARDENS, FL 33410 US

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: PETER JAMISON

10/30/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SANCHEZ, RALPH A  
Address: 550 ARVIDA PRKWY  
City-St-Zip: CORAL GABLES, FL 33156

Title: EVP ( ) Delete  
Name: DOMINICIS, JORGE L  
Address: 8200 SW 156 ST  
City-St-Zip: MIAMI, FL 33157

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: STOVER, RICKY  
Address: 4400 NORTHCORP PKWY  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: D (X) Change ( ) Addition  
Name: CFE,  
Address: 4400 NORTHCORP PKWY  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CFE

D

10/30/2008

Electronic Signature of Signing Officer or Director

Date