

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99D000045422

1. Entity Name

UNITED SPEED WORLD OF FLORIDA INC
3025 W. HILLSBOROUGH AVENUE
TAMPA FL 33614

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3025 W. HILLSBOROUGH AVE

Suite, Apt. #, etc.

3. Mailing Address

3025 W. HILLSBOROUGH AVE

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

TAMPA FL

4. FEI Number

59-3575299

Applied For

☐ Not Applicable

Zip

33614

Country

Zip

33614

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JAMES RINI

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

3025 W. HILLSBOROUGH AVE

City

TAMPA

FL

Zip Code

33614

**DO NOT WRITE
IN THIS SPACE**

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 date if applicable.

James Rini

(NOTE: Registered Agent signature required when renewing)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$850.00

Amended UBR is \$81.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fee

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

POST
JAMES RINI
3025 W. HILLSBOROUGH AVE
TAMPA FL 33614

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 on an attachment with an address with all other filers empowered.

SIGNATURE:

James Rini

3-29-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR

Date

Continued, Please 2

CR2002048 (12/01)