FILED Apr 30, 2003 8:00 am Secretary of State 04-30-2003 90149 022 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Signature Sign	1. Entity Nam	MENT # \$77220 d drag strip inc.				
Suite, Apt. F. etc. City & State City & City & State City & State City & State City & State City & City & State City & City & State City & City & State	8100 HWY 33	: N	3863 BERKLEY ROAD			
City & State Septimized of Status Desired Septimized Country Se	2. Principal P	lace of Business	3. Mailing Address			
Zip Country Zip Country S. Certificate of Status Depired S. S. 75 Additional Foo Regulator Foo Regul	Suite, Apt. #, etc. Suite, Apt. #, etc.				CHECK HERE IF MAK	(ING CHANGES
S. Ceribidate of Status Desired Foe Required Fo	City & State	•	City & State			Applied For Not Applicable
SPIKER, ROY E 3863 BERKLEY ROAD NORTH AUBURNDALE, FL 33823 City FL Zip Code a. The above named entity submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acre in the outgations of registered agent, or both, in the State of Florida. I am familiar with, and acre in the outgations of registered agent. SIGNATURE FLE NOVITI REST IS 155 000 FLE NOVIT	Zip	Country	Zip	Country	5. Certificate of Status Desired	
SPIKER, ROY E 385 BERKLEY ROAD NORTH AUBURNDALE, FL 35823 City FL Zip Code		6. Name and Address of C	current Registered Agent	Name	7. Name and Address of New Registe	red Agent
AUBURNDALE, FL 33823 City FL Zip Code a. 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. I am familiar with, and as the obligations of registered agent. SIGNATURE SIGNATURE FILE NOWIF FEETS \$150.00 After May 1; 2013 Fee Will be \$50.00 Added to Fee Truck Fund Controllion. Added to Fee					e (P.O. Box Number is Not Acceptable)	·
A. 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. I am familiar with, and as the obligations of registered agent. SIGNATURE Statutin, resolve or indicating of macratical quantities and statistics. FILE NOWS/IF EXERS \$150,00 After Play 1, 2003 Rese (with 15% \$550,00) After Play 2, 2003 Rese (with 15% \$550,00) After Play 3, 2003 Rese (with 15% \$550,00) After Play 3, 2003 Rese (with 15% \$550,00) After Play 3, 2003 Rese (with 15% \$550,00) After Play 4, 2003 Rese (with 15% \$550,00) After Play 5, 2003 Rese (with 15% \$550,00)	AUBURNDA	ALE, FL 33823				
the obligations of registered agent. SIGNATURE FILE NOW!!! FEE:IS \$150.00 After May 2003 Neet Writing \$550.00 Add to Feet Various \$550.0				City		FL Zip Code
SIGNATURE Speaker, injusted or printed Capture of Apparent and URB is profession. PATE Registered Appare signature meanwal rate in instalation. DATE			ment for the purpose of changing	Its registered office or regis	stered agent, or both, in the State of Florida. I	am familiar with, and accept
FILE NOVY II FEETS \$150,00 And the Management and the Application Policies and Provided Provi						
After May 1 2003 Rec will be \$SSO.0D Make Chack Payable to Florids Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 110. PS SPIKER, ROYE SPIKER, ROYE SITEST ADDRESS STREET ADDRESS CITY-ST-2P 110. OFFICERS AND DIRECTORS 111. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 IT IN	Andreas de la Constitución de la Co	Commission and Salabasia Indiana (Asiana and Salabasia)	TRANSPORTER MANAGEMENT OF	DTE: Registered Agent signature requ	ired when minstating) . D/	VE .
TITLE NAME SPIKER, ROY E SPIKER, ROY E SPIKER, ROY E SPIKER, ROY E SPIKER ADDRESS CITY-ST-2IP AUBURNDALE, FL 33823 CITY-ST-2IP	After	May 1: 2003 Fee will be \$5	50.00	**	Trust Fund Contribution.	☐ Added to Fees
NAME STREET ADDRESS CITY-ST-2P SPIKER, ROY E SREET ADDRESS STREET ADDRESS CITY-ST-2P					ADDITIONS/CHANGES TO OFFICERS	
TITLE	NAME STREET ADDRESS	SPIKER, ROY E 3863 BERKLEY ROAD NO	PRTH	NAME STREET ADDRESS		Change Addition
NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-2IP	NAME STREET ADDRESS	n	☐ Delete	NAME STREET ADDRESS		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-2P TITLE Delete TITLE NAME STREET ADDRESS CITY-ST-2P TITLE STREET ADDRESS CITY-ST-2P	NAME STREET ADDRESS		Delete	NAME STREET ADDRESS		Change Addition
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NAME STREET ADDRESS CITY-ST-ZP CITY-ST-ZP CITY-ST-ZP	NAME STREET ADDRESS		☐ Delete	NAME Street address	·	☐ Change ☐ Addition
12. 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 discreted 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 directly of the corporation or the receiver or trustee empowered to exempte this report suprequired by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block changed, or on an attachment with an address, with all other tike empowered.	NAME STREET ADDRESS		☐ Delete	NAME STREET ADDRESS		Change Addition
	12. I hereby c indicated of the corp changed,	ertify that the information supplied in this report or supplemental receiver or truste or on an attachment with an ad-	led with this filing does not qualify report is true and accurate and that he empowered to execute this repo diress, with all other the empowere	for the exemption stated in it my signature shall have th ort ag required by Chapter (ne same legal effect as if made under oath; th 507, Florida Statules; and that my name appe	r certify that the information at 1 am an officer or director ars in Block 10 or Block 11 if
SIGNATURE: 4-25-03 SIGNATURE AND TYPED OR PHINTE DATABLE OF SIGNING OFFICER OR DIRECTOR Data Carytima Priore 4	SIGNAT	URE: SKANATURE AND TA	PED OR PRINTED FAME OF SIGNING THE KO	ER OR DIRECTOR	4-25-03	Caviers Phone 4