

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000017348

FILED
Apr 21, 2003
Secretary of State

Entity Name: R1K MOTORSPORTS, INC.

Current Principal Place of Business:

6811 GARDEN ROAD
WEST PALM BEACH, FL 33404 US

New Principal Place of Business:

Current Mailing Address:

6811 GARDEN ROAD
WEST PALM BEACH, FL 33404 US

New Mailing Address:

FEI Number: 65-0811217

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELMORE, PHILLIP
6811 GARDEN ROAD
WEST PALM BEACH, FL 33404 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ELMORE, PHILLIP
Address: 14550 CRAZY HORSE LN
City-St-Zip: WEST PALM BEACH, FL 33418

Title: TD () Delete
Name: ELMORE, DANA
Address: 14550 CRAZY HORSE LN.
City-St-Zip: WEST PALM BEACH, FL 33418

Title: VP () Delete
Name: CRILLY, NEIL
Address: 893 NE 81ST STREET APT 1
City-St-Zip: MIAMI, FL 33138

Title: S () Delete
Name: KING, WILLIAM REEVES
Address: 81 IRONWOOD WAY N
City-St-Zip: WEST PALM BEACH, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PHILLIP ELMORE

PD

04/21/2003

Electronic Signature of Signing Officer or Director

_____ Date