


**FILED**  
**Apr 01, 2005 8:00 am**  
**Secretary of State**

02-09-2005 90034 012 \*\*\*150.00

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT # P97000092731**


1. Entity Name  
**P3 RACING USA, INC.**



Principal Place of Business 6400 W. 20TH AVE. 2 HIALEAH, FL 33016 US	Mailing Address 6400 W. 20TH AVE. 2 HIALEAH, FL 33016 US
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**DO NOT WRITE IN THIS SPACE**

66008130



01202005 No Chg-P CR2E034 (10/03)

4. FEI Number **65-0790580** Applied For  Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HETTEL, GERALD R**  
**11744 SW 53 CT.**  
**COOPER CITY, FL 33330**

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: **1/21/05**

Signature required for all changes of registered office and agent, if applicable. (NOTE: Registered Agent signature required when resigning)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

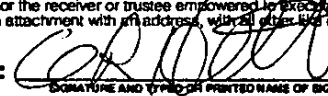
9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>HETTEL, GERALD R</b> 6400 W. 20 AVE. HIALEAH, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>SANDOVAL, TODD A</b> 4065 HARDY ROAD MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>ANDERSON, WILLIAM</b> 9470 SW 81 ST. MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE:  DATE: **3/29/05** DAYTIME PHONE: **305-557-4484**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR