


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2008 08:00 AM
Secretary of State

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



01142008 No Chg-P CR2E034 (11/05)

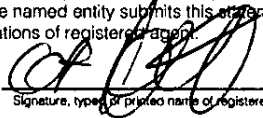
4. FEI Number 65-0790580	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HETTEL, GERALD R
6400 W 20TH AVE
#2
HIALEAH, FL 33016

**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: 1/25/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 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 HETTEL, GERALD R 6400 W. 20 AVE. HIALEAH, FL 33016
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SANDOVAL, TODD A 4065 HARDY ROAD MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ANDERSON, WILLIAM 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	

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02/08/08-80001-007 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 empowered.

SIGNATURE:  DATE: 1/25/08 385-557-4484

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #