2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2012
Secretary of State

DOCUMENT# F14483

Entity Name: EVEREST POLO STABLES, INC.

Current Principal Place of Business:

%ANTHONY SALESI
19 E. 64TH STREET
NEW YORK, NY

New Principal Place of Business:

%DAVID WILDENSTEIN
19 E. 64TH STREET
NEW YORK, NY

Current Mailing Address:

C/O ANTHONY SALESI
19 E. 64TH ST.
NEW YORK, NY

New Mailing Address:

C/O DAVID WILDENSTEIN
19 E. 64TH ST.
NEW YORK, NY

FEI Number: 13-3053800 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: DP
Name: WILDENSTEIN, GUY
Address: 19 E 64TH ST
City-St-Zip: NEW YORK, NY

Title: DVP
Name: WILDENSTEIN, KRISTINA
Address: 19 E 64TH ST
City-St-Zip: NEW YORK, NY

Title: S
Name: WILDENSTEIN, DAVID
Address: 19 E 64TH ST
City-St-Zip: NEW YORK, NY

Title: T
Name: SALESI, ANTHONY
Address: 19 E 64TH STREET
City-St-Zip: NEW YORK, NY

Title: AS
Name: GODTS, CLAUDINE
Address: 19 EAST 64 ST
City-St-Zip: NEW YORK, NY

I hereby 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 all other like empowered.

SIGNATURE: ANTHONY SALESI T 02/06/2012
Electronic Signature of Signing Officer or Director Date