CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 **PROFIT**

FILED Apr 04 1997 8:00am Secretary of State

DOCUMENT #	F94000005072	(3)

T. Corporation Name H AND D STABLES III, INC. Principal Place of Business C/O COLE. PRIPSTEIN AND ASSOCIATES. INC. 8850 STANFORD BLVD. COLUMBIA MD 21045 Mailing Address C/O COLE. PRIPSTEIN AND ASSOCIATES. INC. 8850 STANFORD BLVD. COLUMBIA MD 21045 COLUMBIA MD 21045								
OOLUMDIN ME	21043	OULUMIN ME EIGHT			3. Date incorporated or Qualified	3a. Date of	•	7
A Dansieral I	Place of Business	2a. Mailing Address			09/28/1994 4. FEI Number	04/02/19		4
2. Principal F	nace of Business	28. Mailing Address			52-1807183	ŀ	Applied For Not Applicable	_
Suite, Apt	#, etc	Suite, Apt. #, etc.				□ \$8	3.75 Additional	7
22		27		······································	5. Certificate of Status Desired	<u> </u>	Fee Required	
City & Sta	te	City & State			6, Election Campaign Financing		5.00 May Be	ļ
23 Zip	Country	7 _{ID}			Trust Fund Contribution			
24	25	29	30		Florida Statutes Yes No			1
	9. Name and Address of Curren	t Registered Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Ro	gistered Agent		
	PRENTICE-HALL CORPORATION	N SYSTEM, INC.		81 Name				İ
	1 HAYS STREET, STE 105		!	82 Street Add	ddress (P.O. Box Number is Not Acceptable)			
TAL	LAHASSEE FL 32301			83				4
			١	84 City		10-	1 32 022	4
				84 City		FL 65	Zip Code	1
11. Pursuant office or agent. La	to the provisions of Sections 607,050 registered agent, or both, in the State arn familiar with, and accept the obligation familiar with the state of the obligations are secured to the obligation of the state of the obligations are secured to the obligations of the obligations are secured to the obligations of the obligations are secured to the obligations of the obligati	2 and 607.1508, Florida Stat of Florida Such change wa ations of, Section 607.0505,	utes, the al s authorize Florida Stat	pove-named cor d by the corpora lutes.	poration submits this statement for the ation's board of directors. I hereby acce	purpose of chain pt the appointm	ging its registered ent as registered	
	Signature, type-it or printed harne of registered age			d Agent signature requ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DATE		ے إ
12.	OFFICERS AN	D DIRECTORS DELETE	13.	716	ADDITIONS/CHANGES TO OFFI		hange Addition	-\\ <u>\</u>
TITLE NAME	PD Finkelstein, David	D profit	1.2 N	1		۷ دیا	mange ELI recamon	=
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Čify+S1+ZIP	BALTIMORE MD		- 8	TY-ST-ZIP				. 6
TITLE	VD	DELETE	2.1 11	TLE			hange	٦٢
NAME	FINKELSTEIN, HARRIET		2.2 N	AME				
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CITY-ST-789 TITLE	BALTIMORE MD	DELETE	2 4 C	TIF	· 117		hange Addition	-
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NAME			62 N	AME				
STREET ADDRESS			6.3 S	TREE1 ADDRESS				
CITY 51-719				TY-ST-ZIP				
I THE LANGE MORE	skurand lu that the information accorde	d with this films does not sur	atibu for the	evernation state	nd in Contine 110 07/91/11 Floride Statut.	an 1 fuithar naiti	ny that the	- 1

I do nereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual 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 12 or Block 13 if changed, or on an attachment with an address.