

F96000000505

TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: DONOVAN STABLES, INC.
(Name of corporation - must include suffix)

600001700926
-01/30/96--01030--016
*****70.00 *****70.00

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

DAVID S. OSTROW
(Name of Person)
DAVID S. OSTROW, ESQUIRE, P.A.
(Firm/Company)
11419 CRONRIDGE DRIVE, SUITE 1
(Address)
OWINGS MILLS, MARYLAND 21117
(City/State/Zip)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 JAN 30 PM 2:24

Should you need to call someone concerning this matter, please call:

David S. Ostrow at (410) 654-0600
(Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec.
Division of Corporations
409 E. Gaines St
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

LAW OFFICES OF
David S. Ostrow, Esquire, P.A.
11419 CHONRIDGE DRIVE, SUITE 1
OWINGS MILLS, MARYLAND 21117

(410) 654-0604
FAX (410) 654-0606

January 22, 1996

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Donovan Stables, Inc.

To Whom It May Concern:

Enclosed please find the following documents:

- (1) A Transmittal Letter; and
- (2) A Certification from the Department of Assessments and Taxation and various other documents relating to Donovan Stables, Inc.

Also, enclosed please find my check in the amount of \$70.00 to cover the registration fee.

If you have any questions or problems, please do not hesitate to contact me immediately.

Very truly yours,

David S. Ostrow
David S. Ostrow *mbp*

DSO:mbp
enclosures
cc: file
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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
TO TRANSACT BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE
STATE OF FLORIDA:**

1. DONOVAN STABLES, INC.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Maryland
(State or country under the law of which it is incorporated)
3. 52-1954945
(FEI number, if applicable)
4. 1-02-96
(Date of Incorporation)
5. perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. 2-01-96
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 14 Pomona South #3
Baltimore, Maryland 21208
(Current mailing address)
8. Horse Training
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: Donna Donovan
Office Address: 300 Three Island Boulevard
Hallandale, Florida, 33009
(Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: Donna Donovan

Address: 300 Three Island Boulevard, Unit 602, Hallandale, FL 33009

Vice Chairman:

Address:

Director: Patrick Donovan

Address: 300 Three Island Boulevard, Unit 602, Hallandale, FL 33009

Director:

Address:

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: Donna Donovan

Address: 300 Three Island Boulevard, Unit 602

Hallandale, Florida 33009

Vice President: Patrick Donovan

Address: 300 Three Island Boulevard, Unit 602

Hallandale, Florida 33009

Secretary:

Address:

Treasurer:

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. ✓

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Donna Donovan

(Typed or printed name and capacity of person signing application)

STATE OF MARYLAND

414218

STATE DEPARTMENT OF
ASSESSMENTS AND TAXATION

301 West Preston Street Baltimore, Maryland 21201

DATE: JANUARY 02, 1996

THIS IS TO ADVISE YOU THAT THE ARTICLES OF INCORPORATION FOR
DONOVAN STABLES, INC.
WERE RECEIVED AND APPROVED FOR RECORD ON JANUARY 2, 1996 AT 9:11 AM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 JAN 30 PM 2:24

FEE PAID:

70.00



JOSEPH V. STEWART
CHARTER SPECIALIST

AT5-031