

2000 UNIFORM BUSINESS REPORT (UBR)

3/6/1

FILED
May 12, 2000 8:00 am
Secretary of State

03-06-2000 90127 026 ***150.00

DOCUMENT # F97000002524

1. Entity Name

King Bros. Stables, Inc. ✓

Principal Place of Business

1700 Broadway
New York, NY 10019

Mailing Address

1700 Broadway
New York, NY 10019

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

13-3935472

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Rusin Karen
2225 Glades Rd., #212E
Boca Raton, FL 33431

7. Name and Address of New Registered Agent

Name: CHRISTINA WILSON

Street Address (Not Agent-Residential)

C/O ROGER KING

1301 SPANISH RIVER ROAD

BOCA RATON, FL

Zip Code
33432

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.

SIGNATURE

Signature, typed or printed name of registered agent and file # applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: PRES
NAME: King Roger ☐ Delete
STREET ADDRESS: 1301 Spanish River Road
CITY-STATE-ZIP: Boca Raton, FL 33432

TITLE: VP
NAME: King Michael ☐ Delete
STREET ADDRESS: 12400 Wilshire Blvd., #1200
CITY-STATE-ZIP: Los Angeles, CA 90025

TITLE: SEC.
NAME: Madden Robert ☐ Delete
STREET ADDRESS: 12400 Wilshire Blvd., #1200
CITY-STATE-ZIP: Los Angeles, CA 90025

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-STATE-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-STATE-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-STATE-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

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STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), 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 11 or Block 12 if changed, or on an attachment with an address with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CRS 03/10/00

2/29/00 212-315-4000