

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

FILED

Jul 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT, 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F9700006880** AMENDED
1. Corporation Name

Terrapin Stables, Inc.

Principal Place of Business	Mailing Address
1974 Sproul Rd, Ste 400 Broomall, PA 19008	PO Box 914 Broomall, PA 19008

"AMENDED"

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 Suite, Apt. #, etc		26 Suite, Apt. #, etc		23-2917089		Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution		☐ \$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		☐ Yes ☒ No	

B. Name and Address of Current Registered Agent

**Premium Realty, Inc.
2450 NE Miami Gardens Drive
N. Miami Beach, FL 33180**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Premium Realty, Inc.

7/2/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	11 TITLE	☐ Change ☐ Addition
NAME	Cohen, Philip	12 NAME	
STREET ADDRESS	Suite 400 - 1974 Sproul Rd	13 STREET ADDRESS	
CITY-ST-ZIP	Broomall, PA 19008	14 CITY-ST-ZIP	
TITLE	Vice President	21 TITLE	☐ Change ☐ Addition
NAME	Cohen, Marcia	22 NAME	
STREET ADDRESS	Suite 400 - 1974 Sproul Rd	23 STREET ADDRESS	
CITY-ST-ZIP	Broomall, PA 19008	24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

7/22

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***\$1.25

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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.

SIGNATURE:

Marcia Cohen

Marcia Cohen 7/7/98 (610)353-5166

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/97)