| | CORPORATION | | | FTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE | | | | | | | | | |
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| ANNUAL REPORT | | | Sandra B. Mortham | | | | | | | | | | |
| 1 995 1996 | | | Secretary of State DIVISION OF CORPORATIONS | | | | | | | | | | |
| DOCUMENT # J89888 1. Corporation Name AGM RACING STABLE, INC. Principal Place of Business Mailing Address | | | | | | | | | | | | | |
| | | | | | | · · · | | | | | | | |
| | | | | | | | | DO NOT WRITE | IN THIS S | PACE | | | |
| 8333 W. MCNAB ROAD | | | | | | 3. Date In | Date Incorporated or Qualified 3a. Date of Last Report | | | | rt | | |
| TAMARAC, FL | | 1- | B. G. W | | | | 08/21/ | | 05/0 | 1/94 | | | |
| 2. Principal Place of | Business | - | ı. Mailing Address İ | ı | | | 4. FEI Nur | | | ŀ | | lied For | |
| Suite, Apt. #, etc. | | 26 | Suite, Apt. #, etc | | | | <u>59-283</u> | 9014 | | | | Applicable dditional | |
| 22 | | | 27 | | | | 5. Certificate of Status Desired | | | Fee Required | | | |
| City & State | | | City & State | | | | 6. Election | 6. Election Campaign Financing | | | \$5.00 May Be | | |
| 23 | | 28 | | | | | | und Contribution | į | | Added 1 | | |
| Zip 24 | Country 25 | 29 | Zip | 30 Co. | ıntr | Y | 1 | rporation has liability for Statutes | r intang <u>ibl</u> Yes | No No | der S. 1 | 99.032, | |
| | nd Address of Current | t Reg | istered Agent | | | | 10. Name | and Address of New F | Registered | Agent | | | |
| | | | | | B1 | Name | | | | | | | |
| | | | | | 82 | Street Add | ress (P.O. B | ox Number is Not Accep | otable) | | | | |
| ARTHUR G. MEYERSON | | | | <u> </u> | 83 | | | <u> </u> | | | | | |
| 8333 W. MCNAB ROAD | | | | | | | | | | - [] | | | |
| TAMARAC, FL. | 33321 | | | | 84 | City | | | | FI 8! | 5 Zip (| ode | |
| or registered agent, | isions of Sections 607.050 or both, in the State of Flori cept the obligations of, Sec | ida. Su | ich change was autho | orized by t | he at | oove-named c orporation's b | orporation su oard of direct | bmits this statement for the pors. I hereby accept the appo | purpose of c | hanging It egistered | s registe agent. I | red office am | |
| SIGNATURE: | | | 07,0000,1101101 5ta | itutes. | | | | | | | | | |
| SIGNATURE: | re, typed or printed name | | | | icab | le (NOT | | Agent signature required w | vhen reinsta | | DATI | | |
| SIGNATURE: Signatu | OFFICERS | of re | gistered agent and tit | tie if appi | icab | 13. | | Agent signature required w | vhen reinsta | AND DIR | ECTOR | S IN 12 | |
| SIGNATURE: Signatu 12. TITLE NAME R3 | OFFICERS THUR G. MEYER | AND | gistered agent and tit DIRECTORS - DIRECTOR | tie if appi | icab | 13. 11 TITLE 12 NAME | ADD | <u> </u> | vhen reinsta | | ECTOR | | |
| SIGNATURE: Signatu 12. TITLE NAME STREET ADDRESS 83 | OFFICERS | AND SON | gistered agent and tit DIRECTORS - DIRECTOR | tie if appi | icab | 13. 11 TITLE 12 NAME | ADD | <u> </u> | vhen reinsta | AND DIR | ECTOR | S IN 12 | |
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