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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

K63132

(0)

FILED Apr 28 1998 8:00am Secretary of State

E. J. HOW	ard racing stable	, INC.				
Principal Place of Bu	siness	Mailing A	ddress			T TOO BOTTO OF BUILD AND THOSE STATE THAT DIGIT BUILD STATE
POMPANO RACE TRACK 2213 CYPRESS ISLAND DRIVE				DRIVE		
1800 S.W. 3RD STREET POMPANO BEACH FL 32089			#202 POMPANO BEACH FL 33069			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						02/03/1989
2. Principal Place of Business			a. Mailing Address			4. FEI Number Applied For
Suite, Apt. #, etc.		26 Suite.	Suite, Apt. #, etc.			65-0085871 Not Applicable
22		27	7			5. Certificate of Status Desired Fee Required
City & State		City 8	City & State			6. Election Campaign Financing \$5.00 May Be
Zip Country		28	Zip Country			Trust Fund Contribution
Zip 24	25	29		Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Current Registered Agent		30		10. Name and Address of New Registered Agent	
CORPO	RATION SERVICE COMPA	NY		8		Pater (1) ichara
AAAA AAAAA OTDETT						ress (P.O. Box Number is Not Acer ptable)
TALLAH			8	\perp 22	113 Cypress Island Dr. Apt 202	
			*	"	, ,	
				8		empare Reach FL 85 Zip Code 9
11. Pursuant to the p	provisions of Sections 607.050)2 and 607.150	8, Florida Statute	es, the abo	ve-named corp	
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 SEL	a liberslein -		Deisber	9. C	PA	4/21/98
Signature		eviand file (lapplica ID DIRECTORS			gent signature requir	red when reinstating) DATE
12.	OFFICE NS AN	D DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
	OWARD, E. J.			1.2 NAME	1	
	, #202		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP P	OMPANO BEACH FL 3300	39		1.4 CITY	ST-ZIP	
TITLE			☐ DELETE	2.1 TITLE	1	Change Addition
NAME				2.2 NAMI	i	
STREET ADDRESS					ET ADDRESS	
CITY-ST-ZIP TITLE			DELETE	2 4 CHTY 3 1 TITLE	·····	☐ Change ☐ Addition
NAME				3 2 NAME	i	
STREET ADDRESS				3 3 STRE	ET ADDRESS	
CITY-ST-ZIP				3.4. CITY		
TITLE			DELETE	4.1 TITLE		L Change L Addition
NAME CTREET ADDRESS				4. 2 NAM		
STREET ADDRESS CITY-ST-ZIP				4.3 STREE	ET ADDRESS	
TITLE			DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREE	T ADDRESS	
CITY-ST-ZIP				5.4 CITY		
TITLE			☐ DELET E	6.1 THILE		Change Addition
NAME				6.2 NAME	1	
STREET ADDRESS					T ADDRESS	
CITY-ST-ZIP 14. I hereby certify the	nat the information supplied w	ith this filing do	es not qualify fo	6.4 CITY- or the exem		Section 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this annual report or suppliemental 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.