


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000007187
1. Entity Name
HIALEAH RACING ASSOCIATION, LLC



Principal Place of Business
105 EAST 21ST STREET
HIALEAH, FL 33010

Mailing Address
PO BOX 158
HIALEAH, FL 33011

DO NOT WRITE IN THIS SPACE



04292004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 48-1292939	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BRUNETTI, JOHN J
105 EAST 21ST STREET
HIALEAH, FL 33010

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
Due by May 1, 2004**

U00000152789
05/04/04-80099-023 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BRUNETTI, JOHN J 105 EAST 21ST STREET HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MEM BRUNETTI, JOHN J JR. 105 EAST 21ST STREET HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MEM BRUNETTI, STEPHEN P 105 EAST 21ST STREET HIALEAH, FL 33010
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Amber* **4/30/04** **305 885-8000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #