2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000017876

Entity Name: EQUUS STABLES LLC

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13334 POLO CLUB RD. 330 CINDY DR.

248 WELLINGTON, FL 33414

WELLINGTON, FL 33414

Current Mailing Address: New Mailing Address:

13334 POLO CLUB RD. P.O.BOX 144194

248 CORAL GABLES, FL 33114 WELLINGTON, FL 33414

FEI Number: 65-1147028 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAMPOS, LINA P MS.

13334 POLO CLUB RD.

CAMPOS JIMENEZ, LINA P MS.

330 CINDY DR.

248 WELLINGTON, FL 33414 US
WELLINGTON, FL 33414 US

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: LINA P. CAMPOS JIMENEZ 04/29/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: PSDT (X) Change () Addition Name: FRANCO DE JIMENEZ, YOLANDA Name: FRANCO DE JIMENEZ, YOLANDA

 Address:
 13334 POLO CLUB RD. APT 248
 Address:
 POBOX 144194

 City-St-Zip:
 WELLINGTON, FL 33414
 City-St-Zip:
 CORAL GABLES, FL 33114

Title: () Delete Title: PSDT () Change (X) Addition Name: JIMENEZ RUIZ, GILBERTO

Address: Address: POBOX 144194

City-St-Zip: City-St-Zip: CORAL GABLES, FL 33114

Title: () Delete Title: MNGR () Change (X) Addition

Name: JIMENEZ FRANCO, LINA P

Address: Address: POBOX 144194

City-St-Zip: City-St-Zip: CORAL GABLES, FL 33114

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: YOLANDA FRANCO DE JIMENEZ PSDT 04/29/2009