2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000023986

Entity Name: SATURNIA STABLES, L.L.C.

FILED May 28, 2008 Secretary of State

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

13351 LURAY ROAD

FT. LAUDERDALE, FL 33330

Current Mailing Address: New Mailing Address:

13351 LURAY ROAD

FT. LAUDERDALE, FL 33330

FEI Number: 20-2546772 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ADRIANI, CHRISTINE L
12323 S.W. 55TH STREET
21117 1040
21117 1040

SUITE 1010 SUITE 507

FT. LAUDERDALE, FL 33330 US FT. LAUDERDALE, FL 33330 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: 05/28/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 ADRIANI, MARIO
 Name:
 ADRIANI, MARIO

 Address:
 12323 S.W. 55TH ST #1010
 Address:
 12240 SW 53RD STREET #507

 City-St-Zip:
 FORT LAUDERDALE, FL 33330
 City-St-Zip:
 FORT LAUDERDALE, FL 33330

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

Name: ADRIANI, CHRISTINE Name: ADRIANI, CHRISTINE

 Address:
 12323 S.W. 55TH ST #1010
 Address:
 12240 SW 53RD STREET #507

 City-St-Zip:
 FORT LAUDERDALE, FL 33330
 City-St-Zip:
 FORT LAUDERDALE, FL 33330

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: CHRISTINE ADRIANI MGRM 05/28/2008