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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DOCUMENT # L74032 (8) THOROUGHBRED INVESTMENTS, INC.										
Principal Place of Business BOX 281 ROUTE 9P SARATOGA NY 12866		Mailing Address BOX 281 ROUTE 9-P SARATOGA NY 12888-9809 US				- I HODANGAN ON MERKI ENRIN BEHAR TIMAR MARI BIRAN BIRAN ENRIN ENRIN ENRIN ARAN				
US		09			Ì	3. Date Incorporated or Qualified	1	ate of Last F	leport	7
2. Principal Pl	ace of Business	2a. Mailing Address				05/17/1990 4. FEI Number	U3/	26/1996	pplied For	-{
21		26		·		65-0241025			ot Applicable	
Suite, Apt :	#, Ofc	Suite, Apt. #, etc			1	5. Certificate of Status Desired		T	Additional equired	
City & State)	City & State		·		6. Election Campaign Financing			May Be	7
23	L Constant	28	Cour	Nec		Trust Fund Contribution			to Fees	4
Ζηο 24	Country 25	29	30	нгу	1	This corporation has liability for Florida Statutes	intangible ∐Yes (199.032,	
	9. Name and Address of Curr					10. Name and Address of New R				7
	IANO, JAY P		Į.	81 Name		A. EAIL CHAISTU YOL		wich fr	moter	1/2
) West Camino Real. :A raton fl 33433				Addres /80 0	is (P.O. Box Number is Not Accepted No. Federal Hillyw	(ble) مرجر	suite	200 E	•
500	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Ţ	83			. 			7
			ł	84 City	Ru	e RATON	FL	85 Zip	Code	1
11. Parsu ant t	to the provisions of Sections 607.0	502 and 607.1508, Florida Statu	tes, the ab	ove-named	corpor	ration submits this statement for the	purpose o	•	its registered	-
office or re agent. Lar	egistered agent, or both, in the Sta m familiar with, and accept the obli	ite of Florida. Such change was igations of, Section 607.0505, Fl	authorized orida Stati	t by the corputes.	oration	ration submits this statement for the n's board of directors. I hereby acce	opt the app	oointment as 8/97	registered	
S:GNATURE	ERIC Chais To Signature, typed or printed traine of registered	agent and title if applicable (NO	IE Registered			when reinstating)	DATE	•///		1
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	CERS AN			96/6
MAM:	D DELETE CLEMENS, CHARLES			11 TITLE 12 NAME				Change	Addition	6
STEEL : ASSESS	RT. 9-P BOX 281		1	reet adoress						R2E034
CHY ST 7 F	SARATOGA NY 12866			Y-ST-ZIP	 					
TILLE NAME		☐ DELETE	21 TfT 2.2 NA					Change	Addition	
SUBELL ADORES			1	reet address						-
CHY SILES			2. 4 CI	TV-\$T-ZIP						
10.6		DELETE	3 1 111					Change	Addition	
NAM" STREET ADDRESS			3.2 NA 3.3 ST	me Reet address						{
00Y \$1.75			1	TY-ST-ZIP]
101:1	·	DELETE.	4.1 TIT					☐ Change	Addition	١.
NAM: Strettar-øess			4. 2 N/ 4.3 ST	ame Reet address	١					
CHY-SL 73				IY-ST-ZIP						
10.1		DELETE	51 TH				**************************************	Change	Addition	
NAM: Charaktadarec			5.2 NA	ME Reet adoress						
STEEL LADORESS CHY-ST 741			The state of	IY-ST-ZIP	,					-
Dil.F		DELETE	61111				*	Change	Addition	
N/V:			, 6.2 NA							
STELL ACORESS CHY ST 709				ree1 adoress 14-s1-zip						
14. I do herel	by certify that the information supp	lied with this filing does not qua-	ify for the	exemption s	tated in	n Section 119.07(3)(i), Florida Statul	es. I furthe	er certify that	t the	-
Lam an of	m indicated on this annual report (flicer or director of the corporation in Block 12 or Block 13 if changed	or the receiver or trustee empor	wered to e	xecute this i	eport i	ny signature shall have the same leg as required by Chapter 607, Florida	Statutes;	and that my	name	"

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Apr 21 1997 8:00am

Secretary of State