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

FILED Apr 22 1998 8:00am Secretary of State

ADLAN	I RACING STABLE, INC.	Mailing Address			
1		9753 NW 42ND CT.			
		SUNRISE FL 33351		DO NOT WRITE IN THIS SPACE	
1				3. Date Incorporated or Qualified	0 0 700
				05/23/1990	
—	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	# etc	Suite, Apt. #, etc.		65-0202722	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
<i>Ζ</i> φ.	Country	Nu Nu	Country	 This corporation owes or has paid the of Personal Property Tax due June 30. 	current year Intangible
[24]	[25] 9. Name and Address of Curre	[29] nt Registered Agent	[30]	10. Name and Address of New Registere	
	DLAM, ANDREW E.		81 Name		
	53 NW 42ND CT.		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
SU	INRISE FL 33351			,	
			83		
			84 City	F	85 Zip Code
SIGNATURE 12. THE	Squartine typed or profeshiorne of respectively and OFFICERS AN	researche if applicable (NEVI) DIRECTORS	JE Registered Agent signature requi	rod when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
NAME	ADLAM, ANDREW E.		1.2 NAME		ware a series was been a series to the serie
STREET ADDRESS	9753 NW 42ND CT.		1.3 STHEFT ADDRESS		
CHY-ST-ZIP	SUNRISE FL		1.4 CITY - ST - ZIP		
TITLE	SD Adlam, gwendolyn V.	☐ DETETE	2 1 TITLE		Change Addition
NAME STREET ADDRESS	9753 NW 42ND CT.		2.2 NAME 2.3 STHEET ADDRESS		
CITY ST 7IP	SUNRISE FL		2.4 CITY-ST-ZIP		
THE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. C/TY-ST-Z/P		Change Addition
NAME		רו מונונ	4.1 FITLE 4. 2 NAME		C) Griange (C) Audition
STHEET ADDRESS			4.3 STREET ADDRESS		
CITY S1-ZIP			4 4 CITY - ST - ZIP		
TITLE		DOLLETE	51 THUE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CHY-S1-ZIP		DELETE	5.4 CHY-\$1-ZIP		Change Addition
NAME		בין מנונונ	6.1 TITLE 6.2 NAME		ET CHANGE ET MODEROR
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST ZIP			6 4 CITY - ST-ZIP		
	certify that the information supplied v	with this filing does not qualify		Section 119.07(3)(i). Florida Statutes. I further	certify that the information

indicated on this annual report or supplied with this fining does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental infinial 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 attack prient with an address.

SIGNATURE: