## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 26, 2005 8:00 am Secretary of State DOCUMENT # N03000001083 1. Entity Name 04-26-2005 90132 019 \*\*\*\*61.25 ALL-4-1 EXCEPTIONAL EQUESTRIANS, INC. Principal Place of Business Mailing Address 9630 HAITIAN DRIVE 9630 HAITIAN DRIVE MIAMI FL 33189 MIAMI FL 33189 Jac 10,2005 her adduct is As 0+ 2. Principal Place of Business 3. Mailing Address 1281 Wat Monsfield Street 1281 Mest Monstrela Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) City & State Applied For City & State 4. FEI Number 02-0677572 200040 $\mathcal{O}(\mathcal{O}(\mathcal{O}))$ Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent IVANYI, HEATHER Street Address (P.O. Box Number is Not Acceptable) 9630 HAITIAN DRIVE MIAMI FL 33189 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. DPST TITLE ☐ Delete TITLE ☐ Addition IVANYI, HEATHER NAME NAME 9630 HAITIAN DRIVE STREET ADDRESS STREET ADDRESS MIAMI FL 33189 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition IVANYI, JUAN NAME NAME 9630 HAITIAN DRIVE STREET ADDRESS STREET ADDRESS MIAMI FL 33189 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME IVANYI, SILVIA NAME 9630 HAITIAN DRIVE STREET ADDRESS STREET ADDRESS MIAMI FL 33189 CITY-ST-7IP CITY-ST-ZIP TITE F ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

**FILED** 

12. 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 or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.



## Juan & Heather Ivanyi

To Whom It May Concern:

Please be advised that as of June 10, 2005 our new mailing address will be
Juan & Heather Ivanyi
1281 West Mansfield Street
Lecanto, Florida 34461

Please change all correspondence to this new address as of June 10, 2005. I thank you in advance for your time.

Sincerely,

Juan Ivanyi

Heather Ivanyi