2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12782

Entity Name: U.S.A. PASO HORSE ASSOCIATION, INC.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 18690 SW 100 STREET MIAMI, FL 33196 **Current Mailing Address: New Mailing Address:** P.O. BOX 960518 MIAMI, FL 332960518 FEI Number: 65-0422834 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: PINTOS, LAURA 14211 S.W. 88 ST. APT. 206 MIAMI, FL 33186 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ESCUDERO, JAIME Name: Name: Address: 5700 SW 127TH AVENUE, #1321 Address: City-St-Zip: MIAMI, FL 33183 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: JARAMILLO, EDUARDO Name: ACERO, MARIA Address: 1587 N.E. 182 STREET Address: 5700 SW 127TH AVENUE.#1321 City-St-Zip: N. MIAMI BEACH, FL 33162 City-St-Zip: MIAMI, FL 33183 Title: () Delete Title: () Change () Addition SALAS, JUAN P Name: Name: 14211 SW 88 ST., APT. 206 Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: Title: TS () Delete Title: () Change () Addition Name: PINTOS, LAURA Name: Address: 14211 SW 88 ST., APT. 206 Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: Title: () Delete Title: (X) Change () Addition SALDARRIAGA, ALBA FERNANDEZ, RAUL Name: Name: 14376 SW 96 LN 5700 SW 127TH AVENUE Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33183 Title: (X) Delete Title: () Change () Addition ARBOLEDA, JANET Name: Name: Address: 10614 SW 5 STREET Address: MIAMI, FL 33174 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAUL FERNANDEZ D 04/28/2004