2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# N12782

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

Current Principal Place of Business:

18690 SW 100 STREET
MIAMI, FL 33196 US

New Principal Place of Business:

Current Mailing Address:

18690 SW 100 STREET
MIAMI, FL 33196

New Mailing Address:

18690 SW 100 STREET
MIAMI, FL 33196 US

FEI Number: 65-0422834 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PINTOS, LAURA
14211 S.W. 88 ST.
APT. 206
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

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:

Title: P ( ) Delete
Name: ESCUDERO, JAIME
Address: 5700 SW 127TH AVENUE, #1321
City-St-Zip: MIAMI, FL 33183

Title: S ( ) Delete
Name: ACERO, MARIA
Address: 5700 SW 127TH AVENUE,#1321
City-St-Zip: MIAMI, FL 33183

Title: VP ( ) Delete
Name: SALAS, JUAN P
Address: 14211 SW 88 ST., APT. 206
City-St-Zip: MIAMI, FL 33186

Title: TS ( ) Delete
Name: PINTOS, LAURA
Address: 14211 SW 88 ST., APT. 206
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete
Name: FERNANDEZ, RAUL
Address: 5700 SW 127TH AVENUE
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: MARIA ACERO S 05/01/2008

Electronic Signature of Signing Officer or Director — Date