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Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N42592 (8)

1. Corporation Name

LO DEBAR RACE TRACK SOCIAL SERVICES, INC.

Principal Place of Business

Mailing Address

901 S. FED. HIGHWAY
HALLANDALE FL 33009
US

901 S. FEDERAL HIGHWAY
HALLANDELE FL 33009-7124
US



3. Date Incorporated or Qualified
03/18/1991

3a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

21 3773 SW 41 Street

26 3773 SW 41 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Hollywood, FL

28 Hollywood, FL

Zip

Country

Zip

Country

24 33023

25

US

29 33023

30

US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HERNANDEZ, EDWARD
3773 S.W. 41ST STREET
HOLLYWOOD FL 33023

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME HERNANDEZ, EDWARD
STREET ADDRESS 3773 S.W. 41ST ST.
CITY-ST-ZIP HOLLYWOOD FL

1.1 TITLE Director
1.2 NAME Dean Merten
1.3 STREET ADDRESS 233 Bombay
1.4 CITY-ST-ZIP Lauderdale by the Sea, FL

TITLE VD
NAME SANDERS, GREG
STREET ADDRESS 3021 S.W. 116TH AVE.
CITY-ST-ZIP DAVIE FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE STD
NAME HERNANDEZ, CONNIE
STREET ADDRESS 3773 S.W. 41ST ST.
CITY-ST-ZIP HOLLYWOOD FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D
NAME COLANDO, ANDY
STREET ADDRESS 21001 N.W. 27 AVE
CITY-ST-ZIP MIAMI FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D
NAME BURCH, MRS. ALICE
STREET ADDRESS 1440 NE 101 ST
CITY-ST-ZIP MIAMI SHORES FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Connie Hernandez

1/23/97 (954-9814904)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (9/96)