## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000004408

Entity Name: DADE RIDING CLUB, INC.

FILED Apr 14, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16480 NW 117TH AVENUE 16480 NW 117TH AVENUE

MIAMI, FL 33016 MIAMI, FL 33018

Current Mailing Address: New Mailing Address:

16480 NW 117TH AVENUE 16480 NW 117TH AVENUE

MIAMI, FL 33016 MIAMI, FL 33018

FEI Number: 65-0520794 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:

OLAZABAL, GASPAR V 16480 NW 117TH AVENUE OLAZABAL, GASPAR V 16480 NW 117TH AVENUE

MIAMI, FL 33016 MIAMI, FL 33018

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: 04/14/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 OLAZABAL, GASPAR V
 Name:
 OLAZABAL, GASPAR V

 Address:
 16480 NW 117TH AVENUE
 Address:
 16480 NW 117TH AVENUE

City-St-Zip: MIAMI, FL 33016 City-St-Zip: MIAMI, FL 33018

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GOMEZ, JOSE
 Name:

 Address:
 7331 NW 179TH STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33015
 City-St-Zip:

 $\label{eq:title:sde} {\sf Title:} \qquad {\sf SD} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf SD} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

Name: OLAZABAL, GÁSPAR Name: OLAZABAL, GÁSPAR Address: 16480 NW 117TH AVENUE Address: 16480 NW 117TH AVENUE

City-St-Zip: MIAMI, FL 33016 City-St-Zip: MIAMI, FL 33018

Name: RODRIGUEZ, HERIBERTO Name: RODRIGUEZ, HERIBERTO
Address: 1340 NW 192ND TERRACE Address: 1340 NW 192ND TERRACE

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33169

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: GASPAR OLAZABAL PD 04/14/2004