

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000111466

Entity Name: PRANCING HORSES, INC.

FILED
Mar 20, 2006
Secretary of State

Current Principal Place of Business:

6900 NW 87TH AVENUE
PARKLAND, FL 33067

New Principal Place of Business:

3978 HANOVER CIRCLE
LOXAHATCHEE, FL 33470

Current Mailing Address:

8100 ROYAL PALM BLVD.
SUITE 105
CORAL SPRINGS, FL 33065

New Mailing Address:

3978 HANOVER CIRCLE
LOXAHATCHEE, FL 33470

FEI Number: 74-3061561

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POLLAKE, INGRED L
6900 NW 87TH AVENUE
PARKLAND, FL 33067 US

Name and Address of New Registered Agent:

POLLAKE, INGRED L
3978 HANOVER CIRCLE
LOXAHATCHEE, FL 33470 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: INGRED LIN POLLAK

03/20/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: POLLAK, INGRED L
Address: 6900 NW 87TH AVENUE
City-St-Zip: PARKLAND, FL 33067

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: POLLAK, INGRED L PRES
Address: 3978 HANOVER CIRCLE
City-St-Zip: LOXAHATCHEE, FL 33470

Title: PRES () Change (X) Addition
Name: POLLAK, INGRED L PRES.
Address: 3978 HANOVER CIRCLE
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: INGRED LIN POLLAK

PRES

03/20/2006

Electronic Signature of Signing Officer or Director

Date