

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000088751

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: TZIPORA STABLE CORP.

**Current Principal Place of Business:**

1850 N.W. 94TH AVENUE  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

1850 N.W. 94TH AVENUE  
MIAMI, FL 33172

**New Mailing Address:**

FEI Number: 03-0480753      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EDENBURG, DANIEL  
1850 N.W. 94TH AVENUE  
MIAMI, FL 33172 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: EDENBURG, DANIEL  
Address: 1850 N.W. 94TH AVENUE  
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Delete  
Name: EDENBURG, SIMON  
Address: 1850 NW 94 AVE  
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Delete  
Name: EDENBURG, SILVIA  
Address: 1850 NW 94 AVE  
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Delete  
Name: EDENBURG, DIANA  
Address: 1850 NW 94 AVE  
City-St-Zip: MIAMI, FL 33172

**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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIMON EDENBURG

D

04/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date