

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000111934

FILED  
Mar 17, 2006  
Secretary of State

Entity Name: BLACK LABEL STABLES CORPORATION

## Current Principal Place of Business:

1791 NW 96 TERRACE #4P  
PEMBROKE PINES, FL 33024

## New Principal Place of Business:

8249 NW 36 TH STREET  
#120  
DORAL, FL 33166

## Current Mailing Address:

1791 NW 96 TERRACE #4P  
PEMBROKE PINES, FL 33024

## New Mailing Address:

8249 NW 36 TH STREET  
#120  
DORAL, FL 33166

FEI Number: 74-3108160

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CIOFFI, ANTONIO  
1791 NW 96 TERRACE #4P  
PEMBROKE PINES, FL 33024 US

## Name and Address of New Registered Agent:

LOPEZ, JESUS E  
8249 NW 36 TH STREET  
#120  
DORAL, FL 33166 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: JESUS E LOPEZ

03/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D (X) Delete  
Name: CIOFFI, ANTONIO  
Address: 1791 NW 96 TERRACE #4P  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D ( ) Delete  
Name: RIOS, JUAN C  
Address: 1791 NW 96 TERRACE #4P  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D ( ) Delete  
Name: PUZZI, CLETO  
Address: 1791 NW 96 TERRACE #4P  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: D ( ) Delete  
Name: LOPEZ, JESUS E  
Address: 1791NW 96 TERRACE #4P  
City-St-Zip: PEMBROKE PINES, FL 33024

## 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 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: JESUS E LOPEZ.

P

03/17/2006

Electronic Signature of Signing Officer or Director

Date