2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P0400002799

1. Entity Name



FILED Apr 27, 2007 8:00 am Secretary of State

EQUISPORT PROPERTIES, INC.					04	1-27-2007 90	0224 002 *	**150.00)
Principal Place of Business 205 WORTH AVENUE 303 PALM BEACH, FL 33480 US		Mailing Address 205 WORTH AVENUE 303 PALM BEACH, FL 33480 US			; 	Hi sio hi sshi sshi si	1511 G erika (181	I 18817 ININ 181	ALBERT OF TREE
Principal Place of Business - No P.O. Box #									
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		04252007	Chg-P	CR2E03	4 (12/06)		
City & State		City & State		4. FEI Number 20-05576	64		1 1 .	plied For at Applicable	
Zip	Country	Zip	Country		5. Certificate of	Status Desired		8.75 Add ee Require	
	6. Name and Address of Current	Registered Agent			7. Name and A	ddress of New	Registered A	gent	
DDIAN DI	WIDDE I		Nam	е					
BRIAN, PHILIPPE J 205 WORTH AVENUE 303			Stree	Street Address (P.O. Box Number is Not Acceptable)					
PALM BEACH, FL 33480			City				FL	Zip Code	e
	named entity submits this statement for	gistered offic	e or register	red agent, or both,	in the State of F				
ine obligat	lions of registered agent.								
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	lagistered Agent s	gnature required	d when reinstating)		DATE		
					T				
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.	9. Election Campaign Trust Fund Contrib		\$5 □ Add	.00 May Be led to Fees				
After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550. OFFICERS AND	00 Trust Fund Contrib		\$5 □ Add	.00 May Be led to Fees	HANGES TO OF	FICERS AND	DIRECTORS	S IN 11
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:	Mulille	1. Bran	PHILIPPES BRIAN
	SIGNATURE AND TYPED OR PE	NITED NAME OF SIGNIN	G OFFICER OR DIRECTOR