


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 02, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P94000012884</b> 1. Entity Name HOLLYWOOD PARK, INC.	
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Principal Place of Business 3807 N 29TH AVENUE HOLLYWOOD, FL 33020	Mailing Address 3807 N 29TH AVENUE HOLLYWOOD, FL 33020 US
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01262005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0448545	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  MANDEL, MARVIN 3807 N 29TH AVE. HOLLYWOOD, FL 33020
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required upon reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD HERSMAN, MOSES 1047 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MANDEL, MARVIN 3807 N 29TH AVE. HOLLYWOOD, FL 33020
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD BIELER, ARTHUR 3000 ISLAND BLVD #1003 N MIAMI BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD BIELER, ROSE 3807 N 29TH AVE. HOLLYWOOD, FL 33020
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000211081  
02/02/05-80102-022 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1.31.2005 954-922-8500