## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9500001135 (9)

MARC AUBIN STABLE INC.

) D										
Principal Place	e of Business	Mailing Address					I 14311801 HIN OCIOL DIFFL COLIF BRIEF DON		11 <b>06</b> 1 <b>11606</b> (110)	
2801 PALM AIR DRIVE SOUTH BLDG 31. UNIT 401 POMPANO BEACH FL 33069 US		2901 PALM AIR DRIVE SOUTH BLDG 31. UNIT 401 POMPANO BEACH FL 33069-4211 US								
						<ol> <li>Date Incorporated or Qualified 01/05/1995</li> </ol>		Date of Last Report 05/01/1996		
21	lace of Business	28. Mailing Address 26					<b>4.</b> FEI Number <b>65-0544525</b>		<u> </u>	oplied For of Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A		
City & State		City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t		
Zip	Country	Zip	Соц	intry			This corporation has liability for	intangible	tax under s.	
24	9, Name and Address of Current	29 Registered Agent	30				Florida Statutes  10. Name and Address of New Re		No	
MAG	RELL, PAULA	Hagistered Agent	<del></del>	81	Name		10. Name and Address of New Re	gistered /	4gent	
	LYONS RD #23202			82	Circot	Addes	ss (P.O. Box Number is Not Acceptat	ula)		
	ONUT CREEK FL 33063	82			Sirect	Addres	ss (P.O. Box number is not acceptar	ne) 		
				83						
				84	City			FL	85 Zip (	Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Sta	lules, the al	povo	-named	corpo	ration submits this statement for the p	ourpose of	changing it	s registered
office or ri agent. I ai	egistered agent, or both, in the State om familiar with, and accept the obligations.	of Florida. Such change wa ions of, Section 607.0505,	is authorize: Florida Stal	a by lulos	the cor	poratio	n's board of directors, Thereby accep	ot the app	ointment as	registered
SIGNATURE	Signalure, typed or printed name of registered agen	Constant of the Constant of th	1071 6					F) 471		}
12.	OFFICERS AND		13.	a Ager	a signature	c required	when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND	DIRECTOR	
TITLE	D	☐ DELFTE	1.1 11	HE					☐ Change	Addition
NAME	MARICAUBIN		1,2 NA							Ì
STREET ADDRESS	2901 PALM AIR DR S., BLDG 3	1, UNIT 401	NIT 401 1.3 STREET A		ADDRESS					ļ
CITY-ST-ZIP	POMPANO BEACH FL	₩ DELETE		1Y-S1		8			<b>D</b>	T details on
TITLE	D Paula m aubin	DE DELETE	211I	TEE Shar		110	rrelli Paula		Change	Addition
NAME STREET ADDRESS	2901 PALM AIR DR. S., BLDG 3	1 1 INIT 401	22.00	AME LOCAL	Annot ce	62	rrell, Paula 1240NS Rd # Conut Creek	2320	2.	
CITY-ST-ZIP	POMPANO BEACH FL	יון טווו זעי	2.40	inut i A	RIJUNI SS T. 710	00	Carut Creek	F	4 320	62 l
TITLE		DELETE	3.1 71	TLF	1 - 211	1	557.67		Change	Addition
NAME			3.2 N/	AME						
STREET ADDRESS			3.3 61	IREET A	ADDRESS					ţ
CITY-ST-ZIP	<u> </u>		<del></del>	11Y-S	1 - ZIP	ļ_ <b>_</b>				
TITLE		LJ DELETE	4.1 (1)						Change	L_] Addition
NAME ATOSST LANDSSO			4 2 N		LOBBEAR	1				-
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE		DELETE	511I	TLE	- 711				Change	Addition
NAME	,	_	5.2 N			1				
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			5.4 CI	TY-ST	- ZIP	1_				
, TITLE		☐ DELETE	6 1 T)	TL F					Change	Addition
NAME			62 N	AME						
STREET ADDRESS			6.3 \$1	IREET I	ADDRESS					
CITY-ST-ZIP	ou portify that the information growting	with this bline close act a:		17-51		Lated:	o Section 119 07/2\(\text{(1)}\) Elevide States	n I friether	cortife the	the
informatio	by certify that the information supplied on indicated on this annual report or su flicer or director of the corporation or in Block 12 or Block 13 if changed, or	applementat annual report : The receiver or trustee emp	is true and a lowered to 6	ассц	rate and	o that n	ny signature shall have the same lega	al effect as	s if made un	der oath: that