## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000031772

Entity Name: SPRING STUD FARM, INC.

FILED Apr 27, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3191 CORAL WAY SUITE 114 MIAMI, FL 33145 **New Mailing Address: Current Mailing Address:** 3191 CORAL WAY SUITE 114 MIAMI, FL 33145 US FEI Number: 65-0583436 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SKOLA, THOMAS J SKOLA, THOMAS J 501 BRICKELL KEY DRIVE 1001 BRICKELL BAY DR., SUITE 1508 SUITE 602 MIAMI, FL 33131 US MIAMI, FL 33131 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: 04/27/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition Name: LIMA, WALDYR Name: 3191 CORAL WAY, STE. 114 Address: Address: City-St-Zip: MIAMI, FL 33145 US City-St-Zip: VD Title: Title: ( ) Delete () Change () Addition Name: FILHO, WALDYR L Name: 3191 CORAL WAY, STE. 114 Address: Address: MIAMI, FL 33145 US City-St-Zip: City-St-Zip: ( ) Delete Title: Title: VD. () Change () Addition LIMA, RICARDO C Name: Name: 3191 CORAL WAY, STE. 114 Address: Address: City-St-Zip: MIAMI, FL 33145 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition SKOLA, THOMAS J Name: Name: Address: 501 BRICKEL KEY DR., STE 602 Address: City-St-Zip: City-St-Zip: MIAMI, FL 33131 Title: Title: () Delete () Change () Addition GONCALVES, LUIZ H Name: Name: 3191 CORAL WAY, STE, 114 Address: Address: City-St-Zip: MIAMI, FL 33145 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: FILHO, RAUL L Name: 3191 CORAL WAY, STE. 114 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33145 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUIZ H. GONCALVES M 04/27/2004