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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000072219 (5)

CAROUSEL RACING STABLES, INC.

	Principal Place of Business	Mailing Address
-I. LAUDERDALE FL 33308 FF. LAUDERDALE FL 33308	2887 N.E. 35TH CT. FT. LAUDERDALE FL 33308	2887 N.E. 35TH CT. FT. LAUDERDALE FL 33308

FILED Feb 12 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/19/1995 4. FEI Number Applied For 65-0614433 21 26 Not Applicable Suite. Ant. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country Zip Zip 8. This corporation owes or has paid the current year Intengible Yes 24 25 Personal Property Tax due June 30. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MILLS, RICHARD A III 1401 E. BROWARD BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 206 вэ FT. LAUDERDALE FL 33301 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** (NOTE: Registered Agent signature en reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS ■ DELETE ☐ Change Addition 1.1 TITLE TITLE RABUFFO, MAE NAME 1.2 NAME 2887 N.E. 35TH CT. STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33308 CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP Change Addition DELFTE 3.1 TITLE 3.2 NAME NAME 3.3 STREFT ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 THTLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 54 CITY-ST-ZIP Addition DELETE 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated on this annual report or supplemental annual 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 13 if changed, or or an attachment with an address.

SIGNATURE: