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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600038290

SERENITY STABLE, INC.

Principal Place of Business Mailing Address			1 19031401 110 10110 21111 22111	Vit motte gatan itent folkn sinta in	)   {	
11 ISLAND AVE. 11 ISLAND AVE. #1605 #1605 MIAMI BEACH FL 33139 MIAMI BEACH FI				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed 05/02/1996		
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Appl	ied For
21		26		65-0668336		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	□ \$8.75 Ad Fee Requ	
City & State City  23 28		City & State		Election Campaign Financing     Trust Fund Contribution	□ \$5.00 M Added to	
Zip Country Zip		Zip	Country 8. This corporation owes the current year Intangible		,	
24	25	29	30	Personal Property Tax.		No .
	9. Name and Address of Current I	Registered Agent		10. Name and Address of New F	tegistered Agent	
EMC	O CORPORATE SERVICES, INC.	ed a	81 Name			•
100 N.E. THIRD AVE.			82 Street Ad	dress (P.O. Box Number is Not Accepta	able)	
SUITE 1100			83	* * * * * * * * * * * * * * * * * * *	en la	1 7 37 12Q1
FT. LAUDERDALE FL 33301			"			
		•	84 City	a because a comment	FI 85 Zip Co	ode
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statut	es, the above-named cor	rporation submits this statement for the	purpose of changing its re	gistered
office or i	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligation	Florida, Such change was a	uthorized by the corpora	tion's board of directors. I hereby accep	it the appointment as regis	stered
		113 01, 0000011 007.0000, 710	nda otalatos.			
SIGNATURE	Signature, typed or printed name of registered agent a		: Registered Agent signature requi		DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OF		
TITLE	PSTD	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	BERK, RICHARD		1.2 NAME			
STREET ADDRESS		•	1.3 STREET ADDRESS			
City-ST-ZIP	MIAMI BEACH FL 33139	☐ DELETE	1.4 CITY-ST-ZIP	and the state of	Change	Addition
TTILE		. DELETE	2.1 TITLE		Citarige	☐ Addition
NAME		•	2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			• •
CITY-ST-ZIP		DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	- ()	☐ Change	☐ Addition
1 25.	Control Control		3.2 NAME			
NAME STREET ADDRESS	NEW TO COMP		3.3 STREET ADDRESS			
CITY+ST-ZIP	R This is		3.4. CITY-ST-ZIP	· .		
TITLE	Control of the second of the s	DELETE	4.1 TITLE		☐ Change	Addition
			4. 2 NAME			
STREET ADORESS		* . * *,	4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP	•		
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			

14. I hereby 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

9 (305/347-6700) Daytyle Phone #

☐ Change

Addition

**FILED** 

Jan 21, 1999 8:00am

Secretary of State 01-21-1999 90057 034 \*\*\*150.00

CR2E034 (11/98