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 # P96000042435 (3)

MAYO	COUNTY STABLE, INC.							
Principal Place of Business 2404 NW 22ND WAY BOYNTON BCH FL 33436 US		Mailing Address 2724 W ATLANTIC BLVD POMPANO BEACH FL 33069 US		DO NOT WRITE IN THIS SPACE				
•					3. Date Incorporated or Qualified 05/17/1996			
	lace of Business	2a. Mailing Address				4, FEI Number	 	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				65-0665410 5. Certificate of Status Desired	¢0.75	Additional
22		27					Fee I	Required
City & State	В	City & State	28]			6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip	Country	Zip	Zip Country			8. This corporation owes or has paid th		Intangible
24	25 Name and Address of Curren		30			Personal Property Tax due June 30. 10. Name and Address of New Register		□ NO
R	ROWN, JR J E	it negistered Agent	8	1 N	lame	IO. Hame and Address of New York	nou Agont	
2	724 W ATLANTIO BLVD 2 100	O W ATLANTIC BLU	D 8:	82 Street Add		ess (P.O. Box Number is Not Acceptable)		
P	OMPANO BCH FL 33069	SUITE DIS	8	3				
			8	4 C	ity		85 Zig	p Code
					•		FL ~	,
office or r agent. I a	to the provisions of Sections 607.050 ogistered agent, or both, in the State in familiar with, and accept the ciblig-	12 and 607.1508, Florida Statutes of Florida Such change was au ations of, Section 607.0505, Flor	s, the abo ithorized t ida Staluti	by the es.	imed corp e corporati	oration submits this statement for the purpoion's board of directors. I hereby accept the	ise of changing appointment a	ils registered as registered
SIGNATURE	Signature, typed or printed name of registired age	ent and title if applicable (NOTE:	Registered A	lgent si	gnature require	ed when reinstating) Di	ATE	
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	ORS IN 12
TITLE	PTD	☐ DELETE	1.1 TITLE	1.1 TITLE 1.2 NAME			Change	e 🔲 Additi
HAME	Burke, Mervin		1.2 NAME					
STREET ADDRESS	2404 NW 22ND WAY		1.3 STRE	ET ADD	RESS			
CITY-ST-ZIP	BOYNTON 8CH FL		1.4 CITY-ST-ZIP		P			
TITLE	VPSD	☐ DELETE	2.1 TITLE	2.1 TITLE			∐ Change	e
NAME	QUESNEL, ELISIBETH		2.2 NAME					:
STREET ADDRESS	2404 NW 22ND WAY		2.3 STRE	2.3 STREET ADDRESS				
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NAME			3.2 NAME					
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14. It is a 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.

MANAGEMENT From County Or was and

11148

1/1/90

FILED

May 13 1998 8:00am

Secretary of State