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 # P97000041303 (3)

WONDER HORSE FARMS, INC.

FILED May 04 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | ··· | E PORTIQUE NO LOTIE IDAN BANK BANK BANK BANK BANK BANK HIDDO NIN BANDA NIN HAR | |
|---|---|----------------------|---|------------------------------|--|--|--|
| 19707 TURNBI APARTMENT 1 AVENTURA FL | 2A | APARTMEN | 19707 TURNBERRY WAY APARTMENT 12A AVENTURA FL 33180 | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified |
| 2. Principal P | ace of Business | 2a. Mailing | 2a. Mailing Address | | | | 05/05/1997 4. FEI Number Applied For Applied For |
| 21 | | 26 | \$ | | | | 6J-0 / 9 12 S U Not Applicable |
| Suite, Apt. | #, 6 1C. | Suite, Ap | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required |
| City & State | | i | City & State | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | | | try | | 8. This corporation owes or has paid the current year Intangible |
| 24 | 25 | 29 | | 30 | | | Personal Property Tax due June 30. Yes No |
| 9. Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Registered Agent | | |
| | edfertig, steven | | | ľ | " | Name | |
| | '07:TURNBERRY WAY ARTMENT 12A | | | 8 | 32 | Street Addres | ss (P.O. Box Number is Not Acceptable) |
| | NTURA FL 33180 | | | 8 | 33 | | |
| ţ. | | | | į. | | City | FL 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 Signature, typed or printed name of registered again and title diapprocable (NOTE Registered Agent signature required when reinstating) DATE | | | | | | | |
| 12. | OFFICERS AN | | | 13. | - | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | D | | DELETE | 1.1 TITLE | | | Change Addition |
| NAME | FRIEDFERTIG, STEVEN | | 1.2 | | AE | | |
| STREET ADDRESS | 19707 TURNBERRY WAY, AP | ARTMENT 12A | MENT 12A 1.3 S | | EE1 A | ADDRESS | |
| CITY-ST-ZIP | AVENTURA FL 33180 | | 1.4 | | /- ST- | - ZIP | |
| TITLE | | Ι | DELETE | ETE 2.1 THILE | | | Change |
| NAME | | | 221 | | AE | | |
| STREET ADDRESS | LEET ADDRESS | | 2.3 S | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | i-ZIP | | | | 2. 4 CITY-ST-ZIP | | |
| TITLE | | L | DELETE 31T | | | | Change Addition |
| NAME | | | | | 3.2 NAME | | |
| STREET ADDRESS | ******** | | i i | | | ADDRESS | |
| CITY-ST-ZIP | | | | | Y-ST | I-ZIP | Change Addition |
| TITLE | | | | | 4.1 TITLE | | Change Mudition |
| NAME | | | | 4. 2 NAI | | | |
| STREET ADDRESS | | | | | | ADDRESS | |
| CITY-ST-ZIP | | | DELETE 5.11 | | <u>- SI -</u> | - ZIP | Change Addition |
| TITLE | | | | | | | |
| NAME OTOUT ADDRESS | | | | 5.2 NAM | | IDDDECC | 1 |
| STREET ADDRESS | | | | 5.3 STREET ADDRESS | | | |
| CITY-ST-ZIP TITLE | | | | 5.4 CITY-ST-ZIP 6.1 TITLE | | Change Addition | |
| NAME | | | | 6.2 NAME | | | |
| STREET ADDRESS | | | | | | ADDRESS | |
| CITY-ST-ZIP | | | | 6.4 CITY | | | |
| | certify that the information supplied w | ith this filing does | s not qualify fo | | | | Section 119.07(3)(i), Florida Statutes. I further certify that the information |

officer or director of the corporation or the receiver or trusted expowered 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 abdress.