the obligations of registered agent.

Signature, typed or printed name of registered agent and title if applicable

SIGNATURE.

SIGNATURE:

## 2005 FOR PROFIT CORPORATION **FILED** Feb 25, 2005 08:00 AM Secretary of State ANNUAL REPORT. DOCUMENT # P98000089061 PIXIE DUST & STEEL STABLES, INC. Principal Place of Business Mailing Address 225 SEABREEZE AVENUE 225 SEABREEZE AVENUE PALM BEACH, FL 33480 PALM BEACH, FL 33480 02152005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0876378 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GENDUSA, VINCENT M CPA DO NOT WRITE 470 COLUMBIA DRIVE SUITE G-101 IN THIS SPACE WEST PALM BEACH, FL 33409 8. 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. I am familiar with, and accept

Applied For

561-65-8200

Date

Not Applicable

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		Election Campaign Finance     Trust Fund Contribution	olng 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRE	CTORS			
NAME STREET ADDRESS CITY-ST-ZIP	PSTD ATWATER-RICH ROSBURG, HELEN 225 SEABREEZE AVENUE PALM BEACH, FL 33480				<u> </u>
NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS GITY-ST-ZIP		· 		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					No

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(7), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

OFFICER OR DIRECTOR

President

(NOTE Registered Agent signature required when reinstating)