

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000031676

FILED
Feb 16, 2002 8:00 AM
Secretary of State

Entity Name: HORSEPOWER EQUINE SPORTS THERAPEUTICS, INC.

Current Principal Place of Business:

6343-2 RIVERWALK LANE
JUPITER, FL 33458

New Principal Place of Business:

2457 C ROAD
LOXAHATCHEE, FL 33470

Current Mailing Address:

6343-2 RIVERWALK LANE
JUPITER, FL 33458

New Mailing Address:

2457 C ROAD
LOXAHATCHEE, FL 33470

FEI Number: 65-0995855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDSTEIN, MARK B
2700 NORTH MILITARY TRAIL
SUITE 220
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WHITE, ARLENE D
Address: 6343-2 RIVERWALK LANE
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WHITE, ARLENE D
Address: 2457 C ROAD
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARLENE D. WHITE

MS.

02/16/2002

Electronic Signature of Signing Officer or Director

Date