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FILED
Feb 12 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V30149

(1)

1. Corporation Name

MCHUGH THOROUGHBREDS, INC.

Principal Place of Business

Mailing Address

PO BOX 305
ROUTE 1 BOX 51
MCALPIN FL 32062
US

PO BOX 305
ROUTE 1 BOX 51
MCALPIN FL 32062
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/17/1992

4. FEI Number

59-3132665

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 7550 GRIFFIN ROAD

26 7550 GRIFFIN ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 DAVIE FLA

28 DAVIE FLA

Zip Country

Zip Country

24 33314

29 33314

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCHUGH, J. MICHAEL
ROUTE 1 BOX 17 OR
8979 170 TERRACE
MCALPIN FL 32062

81 Name

MICHAEL MC HUGH

82 Street Address (P.O. Box Number is Not Acceptable)

7550 GRIFFIN ROAD

83

84 City

DAVIE

FL

85 Zip Code

33314

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 agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
0
MCHUGH, J. MICHAEL
ROUTE 1 BOX 17- 7550 GRIFFIN RD
MCALPIN FL DAVIE FLA 33314

☐ DELETE

TITLE
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1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

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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.

SIGNATURE:

Michael McHugh 2-3-98 954-434-8081

CR2E034 (10/97)