

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**  
**Mar 25 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

**DOCUMENT # 331343 (4)**  
 1. Corporation Name  
**CLARIDGE HOUSE, INC.**



Principal Place of Business Mailing Address  
**C/O PACIFIC R E MGMT CORP #403 2490 CORAL WAY MIAMI FL 33145 US**

3. Date Incorporated or Qualified **06/17/1968** 3a. Date of Last Report **04/06/1996**  
 4. FEI Number **13-2617356** 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 has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
 21 State, Apt. #, etc. 26 State, Apt. #, etc.  
 22 City & State 27 City & State  
 23 Zip Country 28 Zip Country  
 24 25 29 30

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**MURAJ,WALD,BIONDO,MATTHEWS & MORENO, PA**  
**25 S.E. SECOND AVENUE, SUITE #900**  
**MIAMI FL 33131**

81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

TITLE	VP	<input type="checkbox"/> DELETE
NAME	SCHULTHEIS, THEODORE	
STREET ADDRESS	422 EAST 58TH STREET	
CITY- ST- ZIP	NEW YORK NY	
TITLE	VPTD	<input type="checkbox"/> DELETE
NAME	ISAIAS, ESTEFANO	
STREET ADDRESS	422 EAST 58TH STREET	
CITY- ST- ZIP	NEW YORK NY	
TITLE	PSD	<input type="checkbox"/> DELETE
NAME	ISAIAS, ROBERTO	
STREET ADDRESS	422 EAST 58TH STREET	
CITY- ST- ZIP	NEW YORK NY	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	ISAIAS, WILLIAM	
STREET ADDRESS	422 EAST 58TH STREET	
CITY- ST- ZIP	NEW YORK NY	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do 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 contained 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 13 or 13 if changed on an attachment with an address

SIGNATURE: *Theodore Schultheis* **THEODORE SCHULTHEIS** 3-11-97 305-859-9811  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)