

FILED
May 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 346329 (6)

1. Corporation Name
3290 Sunrise Investments, Inc.

Principal Place of Business 3291 W. Sunrise Blvd Ft. Lauderdale, FL 33311	Mailing Address 3501 W. Sunrise Blvd Ft. Lauderdale, FL 33311
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3. Date Incorporated or Qualified 05/16/1969	3a. Date of Last Report 07/23/96
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country	4. FEI Number 59-1270576 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 7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

L.N. Cohen
2000 N. State Road 7
Concession Annex #2
Margate, FL 33063

81 Name L.N. Cohen	82 Street Address (P.O. Box Number is Not Acceptable) 1000 N. State Road 7	83 84 City Margate	85 Zip Code FL 33063
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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 fee, if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Henn, Betty 2000 N. State Road 7 Margate, FL 33063	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	PD Henn, Betty 1000 N. State Road 7 Margate, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Parrish, Lori 2000 N. State Road 7 Margate, FL 33063	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	VD Parrish, Lori 1000 N. State Road 7 Margate, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Parrish, Lori 2000 N. State Road 7 Margate, FL 33063	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	STD Parrish, Lori 1000 N. State Road 7 Margate, FL 33063
TITLE NAME STREET ADDRESS CITY-ST-ZIP		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LORI PARRISH Vice President

4/21/97 (954) 791-7927
Date Date of Filing