

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 11 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 729992 (8)**  
1. Corporation Name  
**MARINA DEL MAR, INC.**



Principal Place of Business <b>1500-1510 SE 15 STREET FORT LAUDERDALE FL 33316</b>	Mailing Address <b>441 SOUTH STREET, RD. 7 SUITE 4 MARGATE FL 33067-9807 US</b>
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3. Date Incorporated or Qualified <b>06/19/1974</b>	3a. Date of Last Report <b>03/05/1996</b>
4. FEI Number <b>59-1593404</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 <b>541 S STATE ROAD 7 #12</b>
23 Zip	28 <b>MARGATE FL</b>
24 Country	29 <b>33068</b>
	30 <b>BROWARD</b>

9. Name and Address of Current Registered Agent  
**SUNVEST MANAGEMENT  
441 SOUTH STATE 7  
SUITE 4  
MARGATE FL 33068**

10. Name and Address of New Registered Agent

81 Name <b>Phoenix Management Services</b>
82 Street Address (P.O. Box Number is Not Applicable) <b>541 S. State Rd #7 Suite #12</b>
83
84 City <b>Margate</b>
85 Zip Code <b>FL 33068</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE *Neil Karp* **NEIL KARP** DATE **JAN. 14, 1997**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>TD</b>	1.1 TITLE	<b>President / D</b>
NAME	<b>LIAMBES, ANTHONY, JR.</b>	1.2 NAME	
STREET ADDRESS	<b>1510 SE 15 ST #202</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>FT LAUDERDALE FL</b>	1.4 CITY-ST-ZIP	
TITLE	<b>SD</b>	2.1 TITLE	<b>Paul Murphy Secy/D</b>
NAME	<b>WHITMAN, BETTE</b>	2.2 NAME	<b>1510 SE 15th St. #301</b>
STREET ADDRESS	<b>1500 SE 15 ST #111</b>	2.3 STREET ADDRESS	<b>Ft. Lauderdale, FL</b>
CITY-ST-ZIP	<b>FT LAUDERDALE FL</b>	2.4 CITY-ST-ZIP	
TITLE	<b>PD</b>	3.1 TITLE	<b>Treasurer / D</b>
NAME	<b>ZMURCHAK, AL</b>	3.2 NAME	<b>John Herman</b>
STREET ADDRESS	<b>1500 SE 15 ST # 120</b>	3.3 STREET ADDRESS	<b>1510 SE 15th Street #101</b>
CITY-ST-ZIP	<b>FT LAUDERDALE FL</b>	3.4 CITY-ST-ZIP	<b>Ft. Lauderdale, FL</b>
TITLE	<b>VD</b>	4.1 TITLE	
NAME	<b>MOORE, MARGOT</b>	4.2 NAME	
STREET ADDRESS	<b>1510 S3 15TH ST #305</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>FT LAUDERDALE FL</b>	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Neil Karp* DATE **JAN 14 1997** (991) 977-2777

CR2E037 (9/96)