

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 734181

(1)

1. Corporation Name

PENN PLAZA ASSOCIATION, INC.

Principal Place of Business

1530 PENNSYLVANIA AVE
MIAMI BEACH FL 33139

Mailing Address

1530 PENNSYLVANIA AVE
MIAMI BEACH FL 33139



3. Date Incorporated or Qualified

10/28/1975

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALFONSO, ANTONIA N
1530 PENNSYLVANIA AVE 205
MIAMI BEACH FL 33139

81

Name GEORGE A. BISHOPRIC JR., MD

82

Street Address (P.O. Box Number Is Not Acceptable)
1530 PENNSYLVANIA AVE #202

83

84

City MIAMI BEACH

FL

85

Zip Code 33139

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan 19, 1996

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ANTONIA, ALFONSO
STREET ADDRESS 1530 PENNSYLVANIA AV 205
CITY-ST-ZIP MIAMI BEACH FL

DELETE

TITLE D
NAME DALY, PATRICK
STREET ADDRESS 1530 PENNSYLVANIA AVE
CITY-ST-ZIP MIAMI BEACH FL

DELETE

TITLE D
NAME BISHOPRIC, M.D., DR. GEORGE
STREET ADDRESS 1598 NW 13TH AVENUE
CITY-ST-ZIP BOCA RATON FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT PD
1.2 NAME GEORGE BISHOPRIC JR., MD
1.3 STREET ADDRESS 1530 PENNSYLVANIA AVE #202
1.4 CITY-ST-ZIP MIAMI BEACH FL 33139

Change Addition

2.1 TITLE TREASURER D
2.2 NAME KAMRAN KHAN
2.3 STREET ADDRESS 1530 PENNSYLVANIA AVE #301
2.4 CITY-ST-ZIP MIAMI BEACH, FL 33139

Change Addition

3.1 TITLE SECRETARY D
3.2 NAME ROSE SALEMENSKY
3.3 STREET ADDRESS 1530 PENNSYLVANIA #204
3.4 CITY-ST-ZIP MIAMI BEACH FL 33139

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE A. BISHOPRIC JR., MD

2/11/96

(305) 531-2306

Date

Daytime Phone #

CR2E037 (12/95)

3-18-1996