FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthern

Secretary of State DIVISION OF CORPORATIONS

1996

(7)

DOCUMENT #
1. Corporation Name ATLANTIC BEACH CLUBS-TWO, INC.

FILED May 01, 1996 08:00 AM **Secretary of State**



Principal Place of SILL ULLM/P O BOX 226	AN 84		Mailing Address * BILL ULLMAN P O BOX 22684 FT LAUDERDALE FL 33335							
FT LAUDERDALE FL 33335			FI LAUDERDALE FL 33335				3. Date Incorporated or Qualified			
2. Principal Pla	ce of Business	2a.	. Mailing Address				4. FEI Number 65-0062407	l		Applied For Not Applicable
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.				5. Certificate of Status Desired See Required \$8.75 Additional Fee Required			
City & State	·····	28	City & State				6. Election Campaign Financing Trust Fund Contribution			00 May Be ded to Fees
Zip Country 4 25		29	Zip Country 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ▼ Yes No				
-1	9. Name and Address of		stered Agent				10. Name and Address of New	Registered	Agent	
					81 Na	ame				
ULLMAN	, BILL HIRD AVENUE			-	82 Sti	reet Addres	s (P.O. Box Number is Not Accepta	able)		
	IERFIRST BLDG!				83					
MAMI FI	L 33131				B4 Cit	ty		FI	85	Zip Code
SIGNATURE _	Styriation byperfor pented called of region OFFICE	er lagerta dissea LRS AND DIRE	CTORS	1011 (Reĝistale) 13.		iatane required v	Per rendating ADDITIONS/CHANGES TO OF	EATE FICERS AN		
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I do hereby certify that the information supplied with this firing 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 includated 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 directly of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block. By glunged, or on an attachment with an address

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.

SIGNATURE: