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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L46584

(3)

KONOVER DEVELOPMENT SOUTH CORP.

FILED										
May 06 1997 8:00am										
Secretary of State										

Principal Plan	ce of Businoss	Mailing Address								
'		•	Mailing Address						*****	1 51511 1461
7000 W PALMETTO PARK RD BUITE 408		SUITE 408	7000 W PALMETTO PARK RD SUITE 408							
BOCA RATON	FL 33433	BOCA RATON FL 33433								
9 Denotor I	Diago of Duciness				·	3. Date Incorporated or Qu 01/26/1990	ualified	3a. Date 05/01		Report
21 Principal F	Place of Business	28. Mailing Address	2a. Mailing Address			OF 0400404			Applied For	
Suite, Apt	#, etc.	Suite, Apt. #, etc.				SR 75 Addition			Vot Applicable	
22		27			5. Certificate of Status Dos	sired			Required	
City & Stal	te	City & State			6. Election Campaign Financing \$5.00 May Be				0 May Be	
23		28				Trust Fund Contribution				d to Fees
Zip	Country	Zip	Countr	У		8. This corporation has liab				s. 199.032,
24	25 9. Name and Address of Currer	29 29 Agent	30			Florida Statutes 10. Name and Address of		Yes 🗍		····
ASH	ENFELTER, MARIA	it trogistioned Agent	81	ı	Name	TO. Maine and Address Of	New ne	Aisraien W	ent	* ····*
) W PALMETTO PARK RD			1						
1	TE 408		82	2	Street Addre	ess (P.O. Box Number is Not A	cceptab	de)		
	A RATON FL 33433		83	3						
			64		City					
					,			FL		Code
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State)2 and 607.1508, Florida Statut	es, the above	/O-I	named corpo	oration submits this statement	for the p	urpose of c	hanging	its registered
agent. I a	am familiar with, and accept the oblig	ations of, Section 607,0505, Fig	orida Statuto	iy τ DS.	ne corporan	on a doard of directors, i horet	зу ассер	at the appoi	ntment a	s registered
SIGNATURE							_			
12.	Signature, typed or printed name of registered age	ent and title if applicable (NO1) ID DIRECTORS	Hogistered Ag	gent	signature require	d when reinstating)	ő érűe	DATE	une or o	
TITLE	DO OFFICERS AIN	DELETE	1.1 11116			ADDITIONS/CHANGES T	OOFFIC		DIRECTO Director	
NAME	KONOVER, SIMON	_ partit	1.2 NAME					L	_ Griange	L_J Addition
STREET ADDRESS	7000 W PALMETTO PARK RD		1.3 STREET ADDRESS		nnerss					
CITY-ST-ZIP	BOCA RATON FL 1.4									
TITLE	DO DELETE 21		2110116						Change	Addition
NAME	ASHENFELTER, MARIA		2.2 NAME							
STREET ADDRESS	7000 W PALMETTO PARK RD		2.3 STREET ADDR		DDRESS					
CITY-ST-ZIP	BOCA RATON FL		2. 4 CITY-ST-ZIP		- 71P					
TITLE	DELETE 3.									Addition
NAME	STEINMARK, FRED 7000 W PALMETTO PARK RD		3.2 NAME							
STREET ADDRESS	BOCA RATON FL		3.3 STREE		·					
CITY-ST-ZIP TITLE	BOOK TIATON FE	DELETE	34 CITY -	ST-	ZIP	·	— 		Tohanas	
NAME			4 2 NAME					L.	_I Change	L_] Addition
STREET ADDRESS			4.3 \$1REE		angess					
CITY-ST-ZIP			4.4 C(TY=							
TITLE		DELETE	5.1 THTLE		2"				Change	Addition
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREE	1 AC	ODRESS					
CITY-ST-ZIP			5.4 CITY - :	ST - 2	7IP					
TITLE	DELETE 6:		6.1 TITLE	6.1 TITLE					Change	Addition
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREE							
CITY-ST-ZIP	by certify that the information supplied	d with this filling does not available	6.4 CITY -	S1-2	2IF	in Continu 110 07/000 The Sale	Chartest	16.00	176 - 17	
Informatio	on indicated on this annual tenoti or s	suoplementat annual report is tr	rue and acc	ura	de and that r	my sinnature shall have the se	mo loga!	'affact as if	madeur	edor outbuilded
i am an c	ifficer or director of the corporation or in Block 12 or Block 13 if changed, or	r the receiver or trustee empow	rered to exec	cut	e this report	as required by Chapter 607, F	lorida St	tatules; and	that my	name