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

Mailing Address

SUITE 700

100 W. CYPRESS CREEK RD

FT. LAUDERDALE FL 33309-2140

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business

LAUDERHILL FL 33319-5999

3501 INVERRARY BLVD.

CITY-ST-ZIP

Lam an officer or director of the corporation or the recent appears in Block 12 or Block 13 if changed or on appears

SIGNATURE: SIGNATURE AND PEPED OR PRINTED NAME OF



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000031107 (4)

## **INVERRARY RESORT & HOTEL CORPORATION**

3. Date Incorporated or Qualified 3a. Date of Last Report 04/29/1993 07/30/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0406095 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GREENSPOON, GERALD 81 Name GREENSPOON, MARDER, HIRSCHFELD & RAFKIN 82 Street Address (P.O. Box Number is Not Acceptable) 100 W. CYPRESS CREEK ROAD, STE. 700 83 FT. LAUDERDALE FL 33309 84 City 85 Zip Code 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, type-d or printed name of registered agent and title if applicable (NOTE\_Flugistered Agent's gnature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DPS DELETE TITLE 1.1 TITLE Change Addition GAMEL, JOEL NAME 1.2 NAME 20355 N.E. 34 CT., PENTHOUSE STREET ADDRESS 1.3 STREET ADDRESS AVENTURA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP VPT TITLE DELETE Addition 2.1 TITLE Change SHARABY, ELLIOTT NAME 2.2 NAME 6601 PARK HEIGHTS AVE. STREET ADDRESS 2.3 STREET ADDRESS **BALTIMORE MD** CITY-ST-ZIP 2. 4 CITY-ST-ZIP AVP DELETE TITLE 3.1 TITLE Change Addition GREENSPOON, GERALD NAMI 3.2 NAME 100 WEST CYPRES CREEK ROAD STREET ADDRESS 3.3 STREET ADDRESS FT. LAUDERDALE FL CITY - ST - ZIP 3.4. CITY - ST- ZIP DELETE Change \_\_\_ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 City - ST-2IP 14. I do hereby certify that the information supplied with this filing does not qualify to 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 the end 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 receiption trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

TOCIM. Game 1-16-97 3055344135
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for or trustee or trustee or trustee or trustee or

**FILED** Jan 24 1997 8:00am Secretary of State



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