

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
 AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED

Sep 05 1997 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P96000019736 (3)
 1. Corporation Name
 CLINTON INTERNATIONAL GROUP GULF COAST, INC.

ACFT
#5190
CLG



Principal Place of Business Mailing Address
 2121 PONCE DE LEON BOULEVARD PENTHOUSE CORAL GABLES FL 33131
 2121 PONCE DE LEON BOULEVARD PENTHOUSE CORAL GABLES FL 33131

DO NOT WRITE IN THIS SPACE
 3. Date Incorporated or Qualified 03/01/1996
 3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt. #, etc. 21 Suite, Apt. #, etc.
 22 City & State 22 City & State
 23 Zip Country 23 Zip Country
 24 25 24 25

4. FEI Number Applied For
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
 MARCUS, STEWART
 2121 PONCE DE LEON BOULEVARD PENTHOUSE CORAL GABLES FL 33131

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	M	<input type="checkbox"/> DELETE
NAME	MARCUS, STEWART	
STREET ADDRESS	2121 PONCE DE LEON BOULEVARD, PENTHOUSE	
CITY-ST-ZIP	CORAL GABLES FL 33131	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BOGGIO, LLOYD J	
STREET ADDRESS	2121 PONCE DE LEON BOULEVARD, PENTHOUSE	
CITY-ST-ZIP	CORAL GABLES FL 33131	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SHACKLETON, NICHOLAS J	
STREET ADDRESS	2121 PONCE DE LEON BOULEVARD, PENTHOUSE	
CITY-ST-ZIP	CORAL GABLES FL 33131	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

CR2E034 (4/97)