

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **V71102** (0)

1. Corporation Name
SHELBORNE OCEAN BEACH HOTEL CORP.



Principal Place of Business: **999 WASHINGTON AVENUE MIAMI BEACH FL 33139**
Mailing Address: **999 WASHINGTON AVENUE MIAMI BEACH FL 33139**

3. Date Incorporated or Qualified: **10/14/1992**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business: 21 []
2a. Mailing Address: 26 []
Suite, Apt. #, etc.: 22 []
City & State: 23 []
Zip: 24 [] Country: 25 []
Suite, Apt. #, etc.: 27 []
City & State: 28 []
Zip: 29 [] Country: 30 []

4. FEI Number: **65-0361746**
Applied For: []
Not Applicable: []
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 has liability for intangible tax under s. 199.032, Florida Statutes: [] Yes [] No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GALBUT, ABRAHAM A.
999 WASHINGTON AVE
MIAMI BEACH FL 33139**

81 Name: []
82 Street Address (P.O. Box Number is Not Acceptable): []
83 []
84 City: []
85 Zip Code: **FL** []

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: [] (NOTE: Registered Agent signature required when reinstating) DATE: []

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	GALBUT, RUSSELL W.	
STREET ADDRESS	999 WASHINGTON AVE.	
CITY - ST - ZIP	MIAMI BEACH FL 33139	
TITLE	VSTD	<input type="checkbox"/> DELETE
NAME	GALBUT, ABRAHAM A.	
STREET ADDRESS	999 WASHINGTON AVE.	
CITY - ST - ZIP	MIAMI BEACH FL 33139	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DACKOK, SHLOMO	
STREET ADDRESS	5445 COLLINS AVE	
CITY - ST - ZIP	MIAMI BEACH FL	
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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **RUSSELL W. GALBUT** *Russell W. Galbut* Date: **4/19/96** 672-3100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (12/95)