

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

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FILED
Apr 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **380456** (4)
1. Corporation Name
THE PLACE INVESTMENT, INC.



Principal Place of Business C/O HOWARD J. BRAFMAN 7900 MIAMI LAKES DR. W. MIAMIAH FL 33016-5812	Mailing Address C/O HOWARD J. BRAFMAN 7900 MIAMI LAKES DR. W. MIAMIAH FL 33016-5897
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3. Date Incorporated or Qualified 04/15/1971	3a. Date of Last Report 04/26/1996
4. FEI Number 59-1354410	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	FILES UNDER 22-1039750

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

9. Name and Address of Current Registered Agent
**BRAFMAN, HOWARD J.
7900 MIAMI LAKES DR. W.
MIAMI LAKES FL 33016**

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
FL B5 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
CDP	KISLAK, JAY I.	7900 MIAMI LKS DR. W.	MIAMI LAKES FL	
DVS	BRAFMAN, HOWARD J.	7900 MIAMI LKS DR. W.	MIAMI LAKES FL	
VCFO	GROSS, JAMES P.	7900 MIAMI LAKES DR. W	MIAMI LAKES FL	<input checked="" type="checkbox"/> DELETE
T	FLEISCHMAN, DAVID H.	7900 MIAMI LAKES DR., W	MIAMI LAKES FL	<input checked="" type="checkbox"/> DELETE
ASV	FENELLO, CAROL A.	7900 MIAMI LAKES DR., W	MIAMI LAKES FL	
				<input type="checkbox"/> DELETE

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	

PLEASE SEE EXHIBIT "A" ATTACHED

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 on an attachment with an address.

SIGNATURE:  DATE: 4/10/97 (305) 364-4213

CR2E034 (9/96)

3/21/97

EXHIBIT "A"

BOARD OF DIRECTORS AND OFFICERS
OF
THE PLACE INVESTMENT, INC.

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>
JAY I. KISLAK	DIRECTOR & PRESIDENT	7900 MIAMI LAKES DR. W. MIAMI LAKES, FL 33016
HOWARD J. BRAFMAN	DIRECTOR, VICE PRESIDENT & SECRETARY	7900 MIAMI LAKES DR WEST MIAMI LAKES, FL 33016
THOMAS BARTELMO	VICE PRESIDENT & TREASURER	7900 MIAMI LAKES DR WEST MIAMI LAKES, FL 33016
CAROL A. FENELLO	VICE PRESIDENT & ASSISTANT SECRETARY	7900 MIAMI LAKES DR WEST MIAMI LAKES, FL 33016
EDWARD K. SCHWARZ	VICE PRESIDENT	7900 MIAMI LAKES DR WEST MIAMI LAKES, FL 33016
SIMA K. JELIN	ASSISTANT SECRETARY	1000 HIGHWAY 9 WOODBRIDGE, NJ 07095