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FILED

Apr 22 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 404288 (3)
1. Corporation Name
ORIOLE G & T MANAGEMENT CORP.



Principal Place of Business
1690 SOUTH CONGRESS AVE.
SUITE 200
DELRAY BEACH FL 33445

Mailing Address
1690 SOUTH CONGRESS AVE.
SUITE 200
DELRAY BEACH FL 33445

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified

06/30/1972

4. FEI Number

59-1440660

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 owes or has paid the current year Intangible Personal Property Tax due June 30.

Yes No

9. Name and Address of Current Registered Agent

LEVY, RICHARD D
1690 S CONGRESS AVE
SUITE 200
DELRAY BCH FL 33445

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 the date

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME LEVY, R.D.
STREET ADDRESS 1690 S CONGRESS AVE
CITY-ST-ZIP DELRAY BCH FL

DELETE

TITLE VTD
NAME NUNEZ, A.
STREET ADDRESS 1690 S CONGRESS AVE
CITY-ST-ZIP DELRAY BCH FL

DELETE

TITLE V
NAME D'ADDARIO, MERLE
STREET ADDRESS 1690 S CONGRESS AVE
CITY-ST-ZIP DELRAY BCH FL

DELETE

TITLE PD
NAME LEVY, MARK A.
STREET ADDRESS 1690 S CONGRESS AVE
CITY-ST-ZIP DELRAY BCH FL

DELETE

TITLE VSD
NAME HUBSHMAN, E.E.
STREET ADDRESS 1690 S CONGRESS AVE
CITY-ST-ZIP DELRAY BCH FL

DELETE

TITLE AS
NAME LEVY, JO ANN
STREET ADDRESS 1690 S CONGRESS AVE
CITY-ST-ZIP DELRAY BCH FL

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V/T
1.2 NAME Pivinski, Joseph
1.3 STREET ADDRESS 1690 S Congress Ave 200
1.4 CITY-ST-ZIP Delray Beach, FL 33445

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

14. I 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.

SIGNATURE

JOANN LEVY, AS

4/10/98

561-274-2000

CR2E034 (10/97)

PC 4/22