

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

FILED

May 23 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 # 438942 (5)

1. Corporation Name
CROWN PROPERTIES & CONSTRUCTION CORP.

Principal Place of Business
**910 N.W. TENTH PLACE
FT. LAUDERDALE FL 33311**

Mailing Address
**910 N.W. TENTH PLACE
FT. LAUDERDALE FL 33311-6132**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/29/1973		3a. Date of Last Report 04/25/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 59-2015263		Applied For <input type="checkbox"/> Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		30 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ROSENTHAL (ALAN S.) 1031 N. MIAMI BEACH BLVD. N. MIAMI BEACH FL				81 Name ROSENTHAL (ALAN S.)			
				82 Street Address (P.O. Box Number is Not Acceptable) Turnberry Plaza, Ste. 500			
				83 2875 N.E. 191st Street			
				84 City Aventura			
				85 Zip Code FL 33180			

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KASSAL, STANLEY	1.2 NAME	
STREET ADDRESS	393 CENTER ISLAND	1.3 STREET ADDRESS	
CITY - ST - ZIP	GOLDEN BCH FL	1.4 CITY - ST - ZIP	
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSENTHAL, ALAN S.	2.2 NAME	Rosenthal, Alan S.
STREET ADDRESS	1031 N. MIAMI BEACH BLVD	2.3 STREET ADDRESS	2875 N.E. 191 St, Ste. 500
CITY - ST - ZIP	NORTH MIAMI BEACH FL	2.4 CITY - ST - ZIP	Aventura, FL 33180
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WELLS, RAQUEL	3.2 NAME	Wells, Raquel
STREET ADDRESS	1031 N. MIAMI BEACH BLVD	3.3 STREET ADDRESS	2875 N.E. 191 St., Ste. 500
CITY - ST - ZIP	NORTH MIAMI BEACH FL	3.4 CITY - ST - ZIP	Aventura, FL 33180
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROOKS, RAY	4.2 NAME	Brooks, Ray
STREET ADDRESS	615 S.W. 79TH AVENUE	4.3 STREET ADDRESS	10484 N.W. 3rd Street
CITY - ST - ZIP	NORTH LAUDERDALE FL	4.4 CITY - ST - ZIP	Plantation, FL 33324
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 on an attachment with an address.

SIGNATURE: Gerald Raymond Brooks **Gerald Raymond Brooks 05/07/97 (954)763-6831**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)