FILE NOW: FILING FEE AFT MAY 1ST IS \$550.00

Feb 12 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 608255 (6) DEL MAR PLAZA, INC. Principal Place of Business Mading Address 6853 SW 18TH ST #M110 200 E LAS OLAS BLVD **BOCA RATON FL 33433** SUITE 100 DO NOT WRITE IN THIS SPACE FORT LAUDERDALE FL 33301 3. Date Incorporated or Qualified 01/29/1979 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1895749 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution \Box Added to Fees 28 23 Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name FRANKEL, FRED 6853 SW 18TH ST #M110 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33433** 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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, typical or printed name of registered agent and tite if applicable (NOTE Progistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change TITLE FRANKEL, FRED 1.2 NAME NAME 6853 SW 18TH ST #M110 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELFTE Change Addition 21 TITLE SPEIER, WILLIAM F, JR 2.2 NAME 200 E. LAS OLAS BLVD SUITE 100 2.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP □ Addition DELETE 3 1 TITLE Change TITLE FRANKEL, HENRIETTA L 3.2 NAME NAME 200 E. LAS OLAS BLVD SUITE 100 3 3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELFTE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-S1-ZIP CITY-ST-ZIP Addition DELETE Change 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP Addition DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

TIZILLE FASTER TONICE

14. Thereby 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 suppliemental 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

FILED