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95 MAY -1 AM 10:04

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

CORPORATION ANNUAL REPORT 1995		 FLORIDA DEPARTMENT OF STATE Sandra D. Matheson Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 618823 (9)			
1. Corporation Name THREE ISLANDS INVESTMENTS, INC.			
Principal Place of Business 2900 N. MILITARY TRAIL SUITE 201 SOUTH BOCA RATON FL 33431		Mailing Address 2900 N. MILITARY TRAIL SUITE 201 SOUTH BOCA RATON FL 33431	
2. Principal Place of Business 21 5675 S.W. 35th Ave.		2a. Mailing Address 26 5675 S.W. 35th Ave.	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.	
23 City & State Hollywood, FL		28 City & State Hollywood, FL	
24 33021 Country		29 33021 Country	
9. Name and Address of Current Registered Agent DECKELBAUM, GORDON 2900 N. MILITARY TRAIL SUITE 201 SOUTH BOCA RATON FL 33431		10. Name and Address of New Registered Agent	
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 Signature: Typed or printed name of registered agent and filer if applicable (NOTE: Registered Agent signature required when reappointing) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	11 TITLE	☐ Change ☐ Addition
NAME	DECKELBAUM, YETTA	12 NAME	
STREET ADDRESS	4430 CASPER CT	13 STREET ADDRESS	
CITY - ST - ZIP	HOLLYWOOD FL	14 CITY - ST - ZIP	
TITLE	PD	21 TITLE	☐ Change ☐ Addition
NAME	DECKELBAUM, GORDON	22 NAME	
STREET ADDRESS	4444 PLAYER STREET	23 STREET ADDRESS	
CITY - ST - ZIP	HOLLYWOOD, FL 00000	24 CITY - ST - ZIP	
TITLE	ST	31 TITLE	☐ Change ☐ Addition
NAME	DECKELBAUM, GORDON	32 NAME	
STREET ADDRESS	4444 PLAYER STREET	33 STREET ADDRESS	
CITY - ST - ZIP	HOLLYWOOD, FL 00000	34 CITY - ST - ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 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)(b), 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 this 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 addition.			
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR GORDON DECKELBAUM, PRES		4/27/95 305-983-6310 Date (Typed Name)	