

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

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Apr 02 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 # 625673 (9)
1. Corporation Name
BEECH MOUNTAIN PROPERTIES, INC.



Principal Place of Business 2701 S BAYSHORE DR #PH COCONUT GROVE FL 33133	Mailing Address 2701 S BAYSHORE DR #PH COCONUT GROVE FL 33133-5309
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/13/1979	3a. Date of Last Report 05/01/1996
21 Suite, Apt #, etc	26	27 Suite, Apt #, etc.		4. FEI Number 59-1916344	Applied For Not Applicable
22 City & State	27	28 City & State		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	25 Country	29 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

ROTHSTEIN, LAWRENCE
2701 S. BAYSHORE DR., PENTHOUSE
MIAMI FL 33133

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
NAME	2701 S BAYSHORE DRIVE	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
STREET ADDRESS	COCONUT GROVE FL	2.1 TITLE	2.2 NAME
CITY - ST - ZIP	DVP	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
TITLE	ROTHSTEIN, LAWRENCE	3.1 TITLE	3.2 NAME
NAME	2701 S BAYSHORE DR	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
STREET ADDRESS	COCONUT GROVE FL	4.1 TITLE	4.2 NAME
CITY - ST - ZIP	DVP	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
TITLE	GRAY, LEE	5.1 TITLE	5.2 NAME
NAME	2701 S BAYSHORE DRIVE	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
STREET ADDRESS	COCONUT GROVE FL	6.1 TITLE	6.2 NAME
CITY - ST - ZIP	VSC	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP
TITLE	CAMAROTTI, CARLOS		
NAME	2701 S. BAYSHORE DR.		
STREET ADDRESS	COCONUT GROVE FL		
CITY - ST - ZIP	AS		
TITLE	CRANK, KEITH W.		
NAME	2701 S BAYSHORE DR		
STREET ADDRESS	COCONUT GROVE FL		
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:  Lawrence Rothstein 3/12/97 (305) 854-6803
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date-time Phone #

CR2E034 (9/96)