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Mar 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **708463** (5)

1. Corporation Name

ROYAL TERRACE CONDOMINIUM APTS., INC.



Principal Place of Business	Mailing Address
1722 MAYO ST 106 HOLLYWOOD FL 33020 US	1722 MAYO ST 106 HOLLYWOOD FL 33020 US

3. Date Incorporated or Qualified	02/09/1965
4. FEI Number	59-2388190
Applied For	Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent	
HERMAN, GARY 1722 MAYO ST #103 HOLLYWOOD FL 33020	

10. Name and Address of New Registered Agent	
81 Name	Gary Herman
82 Street Address (P.O. Box Number is Not Acceptable)	1722 Mayo St #103
83	
84 City	HOLLYWOOD
85 Zip Code	FL 33020

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Gary Herman DATE Feb 7, 1997

12. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> DELETE
NAME	GETHINS, HELEN
STREET ADDRESS	1722 MAYST #203
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	D <input type="checkbox"/> DELETE
NAME	FRANKEL, MARY
STREET ADDRESS	1722 MAY 105
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	D <input type="checkbox"/> DELETE
NAME	LESAGE, YVON
STREET ADDRESS	1722 MAYO ST 101
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	PACQUIN, MANON
STREET ADDRESS	1722 MAYO ST 102
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	VPP <input checked="" type="checkbox"/> DELETE
NAME	PACQUIN, DONALD
STREET ADDRESS	1722 MAYO ST 102
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	VPO <input checked="" type="checkbox"/> DELETE
NAME	PACQUIN, DONALD
STREET ADDRESS	1722 MAYO ST 102
CITY-ST-ZIP	HOLLYWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Gary Herman
1.3 STREET ADDRESS	1722 Mayo ST #103
1.4 CITY-ST-ZIP	Hollywood FL 33020
2.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Manny Araya
2.3 STREET ADDRESS	1722 Mayo ST #208
2.4 CITY-ST-ZIP	Hollywood FL 33020
3.1 TITLE	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Dale Sathiene
3.3 STREET ADDRESS	1722 Mayo ST #102
3.4 CITY-ST-ZIP	Hollywood FL 33020
4.1 TITLE	Secretary <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Dale Sathiene
4.3 STREET ADDRESS	1722 Mayo ST #102
4.4 CITY-ST-ZIP	Hollywood FL 33020
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Gary Herman Gary Herman 9549276083

CR2E037 (10/97)