SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sangra'B. Mortham ANNUAL REPORT Secretary of State **DIVISION OF CORPORATIONS** 1997 97 00T 24 MR 9: 01 DOCUMENT # (6)710738 SOUTHERN CLASSIC CONDOMINIUM, INC. Principal Place of Business Mailing Address 1140 71 STREET 2433 N2 118TH TERRACE CORAL SPRINGS FL 33065-3369 MIAMI BCH. FL 33141 3a, Date of Last Report 04/19/1966 04/16/1996 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 2a. 1140 59-1717926 STRUT 21 26 Not Applicable Suite, Apt. #, etc. Suite. \$8.75 Additional 5, Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Bead, H MIUNI Trust Fund Contribution П 23 28 Added to Fees Country Zip Country Zip This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 25 29 30 Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name Va ul DelaTorre GOLDBERG, ELANA **B2** Number is Not Acceptable) 571215 #2 2433 NW 118TH TERR. 83 CORAL SPRINGS FL 33065 84 City 33141 11. Pursuant to the provisions of Sections 617,9502 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 largelar with, and accept the obligations of, Soction 617.0503, Florida Statutes. lo SIGNATURE registered agent and the it applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition President TITLE 1.1 TITLE Samuel Batt 1.2 NAME NAME GOLDBERG, PHILIP 1140 71 STRET 18 STREET ADDRESS 2433 NW 118TH TERR 1.3 STREET ADDRESS Beach, LE 33141 CORAL SPRINGS FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE Seclately Change PD NAME 2.2 NAME AUERBACH, BAUCH margarite Herrera STREET ADDRESS 218 NE 12TH AVE #501G 2.3 STREET ADDRESS 1140 71 5 Fract #6 CITY-ST-ZIR HALLANDALE FL 2.4 CITY-ST-ZIP Beach, RC 3364 DELETE Addition TITLE 3.1 TITLE STD Tresurar D Paul Dela Torre NAME 3.2 NAME GOLDBERG, ELANA 21511025 42 STREET ADDRESS 3.3 STREET ADDRESS 2433 NW 118TH TERR. ecl FG 33141 CITY-ST-ZIP Coral Springs Fl 3.4. CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE V/Ca 4. 2 NAME hlana NAME 2433 HW STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 6.1 TITLE Addition TITLE NAME 6.2 NAME ′-01099---004 -10/29/91 STREET ADDRESS 6.3 STREET ADDRESS ****245.00 ****245.00 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 eath; 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 changes, or on an algorithm with an address.

RECHIRED

10/8/62