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May 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 717401 (4)

1. Corporation Name
AQUARIUS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 2751 S OCEAN DRIVE HOLLYWOOD, FL . 33019	Mailing Address 2751 S OCEAN DRIVE HOLLYWOOD, FL . 33019-2721
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 10/21/1969	3a. Date of Last Report 04/12/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-1445052	Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	30. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

GOLDBERGER, BERNARD J.
2751 SOUTH OCEAN DRIVE, #1404-NO
HOLLYWOOD FL 33019

10. Name and Address of New Registered Agent

81. Name
Michael Fravel

82. Street Address (P.O. Box Number is Not Acceptable)
2751 S. Ocean Drive # PH2-S

83. City, State, Zip
Hollywood, FL 33019

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: *Michael K Fravel* *Michael K Fravel* **3/17/97**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	CARPI, SAMUEL	
STREET ADDRESS	2751 S OCEAN DR	
CITY-ST-ZIP	HOLLYWOOD, FL 00000	
TITLE	CD	<input checked="" type="checkbox"/> DELETE
NAME	FROST, PAUL	
STREET ADDRESS	2751 S OCEAN DR	
CITY-ST-ZIP	HOLLYWOOD, FL 00000	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	GOLDBERGER, BERNARD J.	
STREET ADDRESS	2751 S OCEAN DR	
CITY-ST-ZIP	HOLLYWOOD, FL 00000	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	DREILING, MURIEL	
STREET ADDRESS	2751 S OCEAN DR	
CITY-ST-ZIP	HOLLYWOOD, FL 00000	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	ACKERMAN, LIBBY	
STREET ADDRESS	2751 S. OCEAN DRIVE	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE		<input checked="" type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1st Vice President / D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Klein, William	
1.3 STREET ADDRESS	2751 S. Ocean Drive #405-N	
1.4 CITY-ST-ZIP	Hollywood, FL 33019	
2.1 TITLE	2nd Vice President / D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Robert Zahavi	
2.3 STREET ADDRESS	2751 S. Ocean Drive #303-N	
2.4 CITY-ST-ZIP	Hollywood, FL 33019	
3.1 TITLE	Secretary / D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Sharon Smith	
3.3 STREET ADDRESS	2751 S. Ocean Drive #602-S	
3.4 CITY-ST-ZIP	Hollywood, FL 33019	
4.1 TITLE	Treasurer / D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Michael Finkelstein	
4.3 STREET ADDRESS	2751 S. Ocean Drive #203-N	
4.4 CITY-ST-ZIP	Hollywood, FL 33019	
5.1 TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Seymour Weissman	
5.3 STREET ADDRESS	2751 S. Ocean Drive #1703-S	
5.4 CITY-ST-ZIP	Hollywood, FL 33019	
6.1 TITLE	Michael Fravel - President / D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS	2751 S. Ocean Drive PH2-S	
6.4 CITY-ST-ZIP	Hollywood, FL 33019	

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

SIGNATURE: *Sharon Smith* **3/10/97 (954) 921-7924**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)