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Apr 10 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 # 721839 (9)

1. Corporation Name
EMBASSY TOWER II, INC.



Principal Place of Business 2715 N. OCEAN BLVD. FT LAUDERDALE FL 33308	Mailing Address 2715 N. OCEAN BLVD. FT LAUDERDALE FL 33308-7576
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3. Date Incorporated or Qualified 10/06/1971	3a. Date of Last Report 05/01/1996
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21. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

4. FEI Number 59-1457703	Applied For <input type="checkbox"/> Not Applicable
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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

ERNEST A. MAIELLO
2715 N. OCEAN BLVD
15-E
FT. LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name Alex Cowan, President
82 Street Address (P.O. Box Number is Not Acceptable) 2715 N. Ocean Blvd., PH-D
83 Fort Lauderdale FL 33308
84 City Fort Lauderdale FL
85 Zip Code 33308

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 **Alex Cowan, President, Board of Directors** *Alex Cowan* **March 25/97**

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 P	<input checked="" type="checkbox"/> DELETE
NAME MAIELLO, ERNEST A.	
STREET ADDRESS 2715 N OCEAN BLVD	
CITY-ST-ZIP FT LAUD FL	
TITLE VP	<input checked="" type="checkbox"/> DELETE
NAME BARTUCE, WILLIAM	
STREET ADDRESS 2715 N. OCEAN BLVD. 11-C	
CITY-ST-ZIP FT. LAUDERDALE FL	
TITLE T D	<input type="checkbox"/> DELETE
NAME CARDELLA, JOSEPH	
STREET ADDRESS 2715 N OCEAN BLVD	
CITY-ST-ZIP FT LAUD FL	
TITLE S	<input checked="" type="checkbox"/> DELETE
NAME MOREAU, BERTRAND	
STREET ADDRESS 2715 N. OCEAN BLVD. 8-A	
CITY-ST-ZIP FORT LAUDERDALE FL	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME MOSS, JOEL	
STREET ADDRESS 2715 N. OCEAN BLVD.	
CITY-ST-ZIP FT LAUD FL	
TITLE D	<input type="checkbox"/> DELETE
NAME CLARK, ANN	
STREET ADDRESS 2715 N. OCEAN CIRCLE14-C	
CITY-ST-ZIP FT. LAUDERDALE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME Alex Cowan, President	
1.3 STREET ADDRESS 2715 N. Ocean Blvd., PH-D	
1.4 CITY-ST-ZIP Fort Lauderdale FL 33308	
2.1 TITLE VP D	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME Phyllis Hoynacky	
2.3 STREET ADDRESS 2715 N. Ocean Blvd.	
2.4 CITY-ST-ZIP Fort Lauderdale FL 33308	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE S D	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME Michael Kaye	
4.3 STREET ADDRESS 2715 N. Ocean Blvd., #17-E	
4.4 CITY-ST-ZIP Fort Lauderdale FL 33308	
5.1 TITLE D	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME Alphonso Rennie	
5.3 STREET ADDRESS Nellie Hill,	
5.4 CITY-ST-ZIP Dover Plains, NY 12522	
6.1 TITLE D	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME James Cannon	
6.3 STREET ADDRESS 2715 N. Ocean Blvd., #16-B	
6.4 CITY-ST-ZIP Fort Lauderdale FL 33308	

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 **Alex Cowan, President, Board of Directors** *Alex Cowan* **March 25, 1997**

CR2E037 (9/96)