

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).

FILED
 Jul 25 1997 8:00am
 Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # 748510 (5)

1. Corporation Name
HILLCREST EAST NO. 27 INC.



Principal Place of Business 3850 WASHINGTON STREET HOLLYWOOD FL 33021	Mailing Address 3850 WASHINGTON STREET HOLLYWOOD FL 33021
--	--

DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified 08/13/1979	3a. Date of Last Report 03/26/1996
4. FEI Number 59-2000168	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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**WIENER, HELEN
 3850 WASHINGTON ST
 HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent

81 Name _____
82 Street Address (P.O. Box Number is Not Acceptable) _____
83 _____
84 City _____ **85** Zip Code **FL** _____

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 *Helen Wiener* **7/21/97**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WEINER, SEYMOUR 3850 WASHINGTON ST HOLLYWOOD FL 33021	<input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BROCK, DAN 3850 WASHINGTON STREET HOLLYWOOD FL 33021	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KLEINMAN, PAUL 3850 WASHINGTON STREET HOLLYWOOD FL 33021	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ZELNICK, MAX 3850 WASHINGTON STREET HOLLYWOOD FL 33021	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT WIENER, HELEN 3850 WASHINGTON STREET HOLLYWOOD FL 33021	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HAAS, MEL 3850 WASHINGTON STREET HOLLYWOOD FL 33021	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D. TRINA CHERRY 3850 WASHINGTON ST HOLLYWOOD, FL. 33021
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D. PAUL STRAX 3850 WASHINGTON ST, HOLLYWOOD FL, 33021
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D. EARL GLICKEN 3850 WASHINGTON ST. HOLLYWOOD, FL. 33021
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *Helen Wiener* **7/21/97**
 SIGNATURE REQUIRED **HELEN WIENER 7/21/97 962-7003**

CR2E037 (4/97)