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Mar 06 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 756885 (0)

1. Corporation Name

OLYMPUS SOCIAL CLUB, INCORPORATED

Principal Place of Business

600 THREE ISLANDS BLVD.
HALLANDALE FL 33009

Mailing Address

600 THREE ISLANDS BLVD.
HALLANDALE FL 33009-28883. Date Incorporated or Qualified
03/23/19813a. Date of Last Report
02/22/1996

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

4. FEI Number

59-1877215

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

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 PD ☐ DELETENAME LEE KLOIN
STREET ADDRESS 712 SW DIXIE HWY
CITY - ST - ZIP HALLANDALE FL 33009TITLE T ☐ DELETENAME LESSER, GERTRUDE
STREET ADDRESS 2500 PARKVIEW DRIVE
CITY - ST - ZIP HALLANDALE FLTITLE S ☐ DELETENAME RUBIN, GERTRUDE
STREET ADDRESS 500 THRE ISLNAD BLVD.
CITY - ST - ZIP HALLANDALE FLTITLE VP ☐ DELETENAME BRAVERMAN, MURRAY
STREET ADDRESS 500 THREE ISLANDS BLVD
CITY - ST - ZIP HALLANDALE FLTITLE D ☐ DELETENAME MANN, RUTH
STREET ADDRESS 600 3 ISLAND BLV
CITY - ST - ZIP HALLANDALE FLTITLE DV ☐ DELETENAME MARCUS, JESSIE
STREET ADDRESS 600 E ISLAND BLVD
CITY - ST - ZIP HALLANDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 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:

Gertrude Lesser

2/20/97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0022623

CR2E037 (9/96)