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Apr 03 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **828316** (0)  
1. Corporation Name  
**CV REIT, INC.**



Principal Place of Business <b>100 CENTURY BLVD WEST PALM BEACH FL 33417-4699</b>	Mailing Address <b>100 CENTURY BLVD WEST PALM BEACH FL 33417-4699</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified <b>07/20/1972</b>	
4. FEI Number <b>59-0950354</b>		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		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 <b>ELAINE KAHANT 19146 LYONS ROAD BOCA RATON FL 33434</b>		10. Name and Address of New Registered Agent 81 Name <b>ELAINE HAUFF</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>SAME</b> 83 84 City <b>FL</b> 85 Zip Code	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *Elaine Hauff* 3-11-98  
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	VT KAHANT, ELAINE 100 CENTURY BLVD. WEST PALM BEACH FL <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	VT HAUFF, ELAINE 100 CENTURY BLVD. WEST PALM BEACH, FL 33417 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FLOYD, ORILLA 100 CENTURY BLVD WEST PALM BEACH FL 33417 <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C WILENSKY, ALVIN 100 CENTURY BLVD WEST PALM BEACH FL 33417 <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	C LEVY, H. IRWIN 100 CENTURY BLVD. WEST PALM BEACH, FL 33417 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHULMAN, ALAN 100 CENTURY BLVD. W PALM BEACH FL 33417 <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BRENNER, STANLEY 100 CENTURY BLVD. WEST PALM BEACH FL 33417 <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	D BRENNER, STANLEY 100 CENTURY BLVD. WEST PALM BEACH, FL 33417 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GACHE, MAC 100 CENTURY BLVD. WEST PALM BEACH FL <input checked="" type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	DP MESHON, LOUIS SR. 100 CENTURY BLVD. WEST PALM BEACH, FL 33417 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Elaine Hauff VP* 3-11-98 561-487-9621

CR2E034 (10/97)

ADDITIONS TO 1998 CORPORATION ANNUAL REPORT  
CV REIT, INC.  
DOCUMENT #828316

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LEVY, ALLYN L.  
100 CENTURY BLVD.  
WEST PALM BEACH, FL 33417

D  
COHEN, STANLEY  
100 CENTURY BLVD.  
WEST PALM BEACH, FL 33417

D  
SCHNEIDER, MILTON  
100 CENTURY BLVD.  
WEST PALM BEACH, FL 33417