## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9400000860 (6) 1. Corporation Name HOLLYWOOD, INC. (KENDALE)

FILED
May 06 1997 8:00am
Secretary of State

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Principal Place of Business  #200  800 SOUTH PARK ROAD HOLLYWOOD FL 33021		Mailing Address  #200 200 SOUTH PARK ROAD HOLLYWOOD FL 33021-8541						
13. 					<ol> <li>Date Incorporated or Qualifie 02/21/1994</li> </ol>		te of Last <b>4/1996</b>	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number			Applied For
21 26					65-0480563			Nut Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired XX \$8.75 Additional				
22		27		C. Sortingale of Oldies Desired	2101.	Fee	Required	
City & State		City & State		6. Election Campaign Financing	, , , , , , , , , , , , , , , , , , , ,			
23		28	<del></del>		Trust Fund Contribution	<u> </u>		d to Fees
Zip	Country	Zφ	Country	,	8. This corporation has liability to			s. 199.032,
24	25 2. Name and Address of Current	29 Pagistared Agent	30		Florida Statutes  10. Name and Address of New		No	
ero	TZER, THEODORE R	negistered Agent	81	Name	10, Name and Address of New	negistered A	.Beiir	
	SOUTH PARK ROAD #200							
	LYWOOD FL 33021		82	Street Add	dress (P.O. Box Number is Not Accep	table)		
	LINOUD IL OUIE!		83					
1.30			84	City		FL	85 Zi	p Code
: :44 0	to the provisions of Sections 607.0502	and CO7 1500 Florida Cial	uton the above		recording to hooks this atstament for the		Shoppin.	to registered
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND		O11 Registered Apr	ent signature requ	uited which reinstalling)  ADDITIONS/CHANGES TO OF	DATE	DIRECT	3DC IN 12
12.	PCD OFFICERS AND	DELETE	1.1 TOLE		ADDITIONS/CHANGES TO OF	FICENS AND	Change	
NAME	SWERDLOW, MICHAEL J	otte	1.2 NAME				E. J. Orionigi	c [_] Ado-((off
STREET ADDRESS	200 SOUTH PARK ROAD #200		1.3 STREET	*000000				
1 i i i	HOLLYWOOD FL							
CITY-ST-ZIP	EVP	DELETE	1.4 CHY- S 2.1 TITLE				Change	e [] Addition
NAME	ZOHN, FRANK		2 2 NAME	j			ondrig.	5 L_ radition
STREET ADDRESS	200 SOUTH PARK ROAD, #200		2.3 STREET	ADD9600A	•			
CITY-ST-ZIP	HOLLYWOOD FL		2. 4 CITY-					
TITLE	SVPS	DELETE	3.1 111LE	51-211			Change	e
NAME	STOTZER, THEODORE R	<del></del>	3.2-NAME	Ì				
STREET ADDRESS	200 SOUTH PARK ROAD, #200		3.3 STREET	ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL		3.4. CHTY-					
TITLE	VPT	☐ DELFTE	4.1 11111				Change	e Addition
NAME	IAMMATTEO, MARICE C.		4. 2 NAME				2	
STREET ADDRESS	200 SOUTH PARK ROAD, #200		4.3 STREET	ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL		4.4  CiTY - S					
TITLE		□ DELETE	5.1 TILE			-	Change	e
NAME			5.2 NAME					
STREET ADDRESS			5.3 \$18661	ADDRESS				
CITY-ST-ZIP			5.4 (CiTy - S					
TITLE		DELETE	6.1 TITLE				Change	e Addition
NAME			6.2 NAME				·	
STREET ADDRESS		•	6.3 ETREET	ADDRESS				
CITY-ST-ZIP			64bhy-5	Y Y				
VIII - U(*EIF	the state of the s	10 01 Diameter	3 4 Jan 17 3	1 610	11.0	7 77 31	117 - 11	

s not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the report is true and accurate and that my signature shall have the same legal effect as if made under eath; that the empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name I do hereby certify that the information supplied with this fill information indicated on this annual report or supplier and an an officer or director of the corporation office receive appears in Block 12 or Block 13 if changed of the an attainment of the corporation of the corp