FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F94000002988 (3)**

1. Corporation Name
FOUNTAIN COURT MANAGEMENT CORP.

Principal Place of Business
2100 HWY 35. STE A
SEA GIRT NJ 08750

Mailing Address
2100 HWY 35. STE A
SEA GIRT NJ 08750

3. Date Incorporated or Qualified: 06/08/1994
3a. Date of Last Report: 07/19/1995
4. FEI Number: 22-3294395 — [ ] Applied For [ ] Not Applicable
5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes [ ] Yes [X] No

2. Principal Place of Business
21 ______
22 Suite, Apt. #, etc.
23 City & State
24 Zip — 25 Country

2a. Mailing Address
26 ______
27 Suite, Apt. #, etc.
28 City & State
29 Zip — 30 Country

9. Name and Address of Current Registered Agent

LEE, FELIX H
2600 9TH STREET NORTH STE 600
ST PETERSBURG FL 33704

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 Section 607.0502 and 617.0502, 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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	VSD	[ ] DELETE
NAME	TAWIL, RALPH	
STREET ADDRESS	19707 TURNBERRY WAY	
CITY-ST-ZIP	NORTH MIAMI BEACH FL	
TITLE	PTD	[ ] DELETE
NAME	TAWIL, SAUL	
STREET ADDRESS	1100 OCEAN AVENUE	
CITY-ST-ZIP	ELBERON NJ	
TITLE	V	[ ] DELETE
NAME	MASSRY, DANIEL	
STREET ADDRESS	2100 HWY 35, STE A	
CITY-ST-ZIP	SEA GIRT NJ	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

(Six blank entries, each with TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP and [ ] Change [ ] 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)(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: Saul Tawil — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/96 — (212) 391-0170

CR2E034 (12/95)