FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 12 PM 10:07

DOCUMENT # **G13878** **(5)**

1. Corporation Name
DELRAY ISLANDS, INC.

Principal Place of Business	Mailing Address
% KEITH A. JAMES, ESQ. 777 S FLAGLER DR STE 310 WEST PALM BEACH FL 33401	% KEITH A. JAMES, ESQ. 777 S FLAGLER DR STE 310 WEST PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/16/1982
3a. Date of Last Report: 04/28/1994

2. Principal Place of Business
21 13161 Burgundy Drive South
Suite, Apt. #, etc. 22
City & State 23 Palm Beach Gardens, FL
Zip 24 33410 Country 25 USA

2a. Mailing Address
26 13161 Burgundy Drive South
Suite, Apt. #, etc. 27
City & State 28 Palm Beach Gardens, FL
Zip 29 33410 Country 30 USA

4. FEI Number: 59-2288296 ☐ 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 ☐ No

9. Name and Address of Current Registered Agent

GOLDSTEIN GILBERT
13161 BURGUNDY DR S
PALM BEACH GARDENS FL 33410

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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DV	11 TITLE		☐ Change ☐ Addition
NAME	WOLDOW, ROBERT D	12 NAME		
STREET ADDRESS	2505 S.OCEAN BLVD.,#317	13 STREET ADDRESS		
CITY-ST-ZIP	PALM BCH. FL	14 CITY-ST-ZIP		
TITLE	DP	21 TITLE		☐ Change ☐ Addition
NAME	GOLDSTEIN, GILBERT	22 NAME		
STREET ADDRESS	13161 BURGUNDY DR. S.	23 STREET ADDRESS		
CITY-ST-ZIP	PALM BCH. GARDENS FL	24 CITY-ST-ZIP		
TITLE	DT	31 TITLE		☐ Change ☐ Addition
NAME	STEWART, WILLIAM K	32 NAME		
STREET ADDRESS	350 S OCEAN BLVD	33 STREET ADDRESS		
CITY-ST-ZIP	PALM BCH, FL 00000	34 CITY-ST-ZIP		
TITLE	D	41 TITLE		☐ Change ☐ Addition
NAME	GITTIS, HOWARD	42 NAME		
STREET ADDRESS	195 VIA DEL MAR	43 STREET ADDRESS		
CITY-ST-ZIP	PALM BCH. FL	44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Gilbert Goldstein 3/22/95 (407) 626-2644
SIGNATURE AND TYPED OR PRINTED NAME OF RANKING OFFICER OR DIRECTOR — Date — Daytime Phone #

0241992 CP