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Jan 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # G13878 (5)
1. Corporation Name
DELRAY ISLANDS, INC.



Principal Place of Business Mailing Address
13161 BURGUNDY DRIVE SOUTH 13161 BURGUNDY DRIVE SOUTH
~~777 S FLAGLER DR STE 310~~ ~~777 S FLAGLER DR STE 310~~
PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410-1479
US US

3. Date Incorporated or Qualified 12/16/1982 3a. Date of Last Report 04/04/1996

2. Principal Place of Business 2a. Mailing Address
21 13161 BURGUNDY DR. S. 26 13161 BURGUNDY DR. S.
Suite, Apt. #, etc. Suite, Apt. #, etc.

4. FEI Number 59-2288296 Applied For Not Applicable

22 City & State 27 City & State
23 PALM BEACH GARDENS, FL 28 PALM BEACH GARDENS, FL

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

24 33410 25 USA 29 33410 30 USA

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 33410 25 USA 29 33410 30 USA

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

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 ☐ DELETE
NAME DV
STREET ADDRESS WOLDOW, ROBERT D
CITY-ST-ZIP 2505 S.OCEAN BLVD.,#317
PALM BCH. FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME DP
STREET ADDRESS GOLDSTEIN, GILBERT
CITY-ST-ZIP 13161 BURGUNDY DR. S.
PALM BCH. GARDENS FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME DT
STREET ADDRESS STEWART, WILLIAM K
CITY-ST-ZIP 350 S OCEAN BLVD
PALM BCH, FL 00000

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME D
STREET ADDRESS GITTIS, HOWARD
CITY-ST-ZIP 195 VIA DEL MAR
PALM BCH. FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 its 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. Attach an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)