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CORPORATION  
ANNUAL REPORT  
1995



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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 FEB -3 AM 9:46

DOCUMENT # G32849 (3)

1. Corporation Name

POLO PARK DEVELOPERS, INC.

Principal Place of Business

Mailing Address

12525 US HIGHWAY 27 N  
DAVENPORT FL 32803

C/O DAVID BORNSTEIN  
12525 US HIGHWAY 27 N  
DAVENPORT FL 33837  
US

DO NOT WRITE IN THIS SPACE.

|                                                                                                                                                     |                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| 3. Date Incorporated or Qualified<br>04/06/1983                                                                                                     | 3a. Date of Last Report<br>01/25/1994 |
| 4. FEI Number<br>59-2280672                                                                                                                         | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired<br><input type="checkbox"/>                                                                                        | \$8.75 Additional<br>Fee Required     |
| 6. Election Campaign Financing<br>Trust Fund Contribution<br><input type="checkbox"/>                                                               | \$5.00 May Be<br>Added to Fees        |
| 8. This corporation has liability for intangible tax under S. 199.032,<br>Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No |                                       |

|                                                       |                                             |
|-------------------------------------------------------|---------------------------------------------|
| 2. Principal Place of Business<br>21. Polo Park, Ltd. | 2a. Mailing Address<br>25. 12525 US Hwy 27N |
| Suite, Apt. #, etc.<br>22.                            | Suite, Apt. #, etc.<br>27.                  |
| City & State<br>23.                                   | City & State<br>28. Davenport, FL 33837     |
| Zip<br>24.                                            | Zip<br>29.                                  |
| Country<br>25.                                        | Country<br>30. USA                          |

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BORNSTEIN, DAVID S  
12525 US HIGHWAY 27 NORTH  
DAVENPORT FL 33837

|                                                        |              |
|--------------------------------------------------------|--------------|
| 81. Name                                               | 85. Zip Code |
| 82. Street Address (P.O. Box Number is Not Acceptable) |              |
| 83.                                                    |              |
| 84. City                                               | FL           |

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: *David Bornstein* DATE: 1/30/95  
(NOTE: Registered Agent signature required when not stating)

| 12. OFFICERS AND DIRECTORS |                           | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                   |
|----------------------------|---------------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TITLE                      | VSD                       | 1.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | ROCHE, DREAMA             | 1.2 NAME                                              |                                                                   |
| STREET ADDRESS             | 1111 E. AMELIA ST.        | 1.3 STREET ADDRESS                                    |                                                                   |
| CITY - ST - ZIP            | ORLANDO FL                | 1.4 CITY - ST - ZIP                                   |                                                                   |
| TITLE                      | PTD                       | 2.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | BORNSTEIN, DAVID S        | 2.2 NAME                                              |                                                                   |
| STREET ADDRESS             | 12525 US HIGHWAY 27 NORTH | 2.3 STREET ADDRESS                                    |                                                                   |
| CITY - ST - ZIP            | DAVENPORT FL              | 2.4 CITY - ST - ZIP                                   |                                                                   |
| TITLE                      | VPD                       | 3.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | BORNSTEIN, RITA           | 3.2 NAME                                              |                                                                   |
| STREET ADDRESS             | 1401 ARTHUR STREET        | 3.3 STREET ADDRESS                                    |                                                                   |
| CITY - ST - ZIP            | ORLANDO FL                | 3.4 CITY - ST - ZIP                                   |                                                                   |
| TITLE                      |                           | 4.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                           | 4.2 NAME                                              |                                                                   |
| STREET ADDRESS             |                           | 4.3 STREET ADDRESS                                    |                                                                   |
| CITY - ST - ZIP            |                           | 4.4 CITY - ST - ZIP                                   |                                                                   |
| TITLE                      |                           | 5.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                           | 5.2 NAME                                              |                                                                   |
| STREET ADDRESS             |                           | 5.3 STREET ADDRESS                                    |                                                                   |
| CITY - ST - ZIP            |                           | 5.4 CITY - ST - ZIP                                   |                                                                   |
| TITLE                      |                           | 6.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                           | 6.2 NAME                                              |                                                                   |
| STREET ADDRESS             |                           | 6.3 STREET ADDRESS                                    |                                                                   |
| CITY - ST - ZIP            |                           | 6.4 CITY - ST - ZIP                                   |                                                                   |

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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:

*David Bornstein*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/30/95

Daytime Phone #

1-800-5376094