

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

FILED
Mar 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G93297 (1)
 1. Corporation Name
SEA OAKS BEACH & TENNIS CLUB, INC.



Principal Place of Business 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963	Mailing Address 1235 WINDING OAKS CIRCLE VERO BEACH FL 32963
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DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business	26 2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

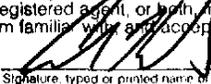
3. Date Incorporated or Qualified 03/27/1984	
4. FEI Number 59-2492496	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
HENDERSON, STEVE L.
817 BEACHLAND BLVD.
VERO BEACH FL 32964

10. Name and Address of New Registered Agent

81 Name	ANDREW KWIAT
82 Street Address (P.O. Box Number is Not Acceptable)	C/O CONSTRUCTA, INC.
83	2665 So. Bayshore Dr #302
84 City	Coconut Grove FL
85 Zip Code	33133

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  **ANDREW KWIAT, SECRETARY/TREASURER 3/10/98**
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

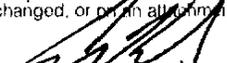
12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	JACQUES BRION	
STREET ADDRESS	1235 WINDING OAKS CIR.	
CITY-ST-ZIP	VERO BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	JEAN-MARC MEUNIER	
1.3 STREET ADDRESS	2665 So. Bayshore Dr #302	
1.4 CITY-ST-ZIP	COCONUT GROVE, FLA 33133	
2.1 TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	ERIC FAZILLEAU	
2.3 STREET ADDRESS	2665 So. BAYSHORE DR. #302	
2.4 CITY-ST-ZIP	COCONUT GROVE, FLA 33133	
3.1 TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	GEORGE GIEBEL	
3.3 STREET ADDRESS	2665 So. BAYSHORE DR. #302	
3.4 CITY-ST-ZIP	COCONUT GROVE, FLA 33133	
4.1 TITLE	SECRETARY, TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	ANDREW KWIAT	
4.3 STREET ADDRESS	2665 So. BAYSHORE DR. #302	
4.4 CITY-ST-ZIP	COCONUT GROVE, FLA 33133	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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:  **ANDREW KWIAT SECRETARY 3/10/98 (305) 858-7749**

CR2E034 (10/97)