PR CORPO ANNUA	OR BEFORE 8/7/96: \$225 (IF DIS OPIT DRATION L REPORT	SOLVED, MII	ED ON OR AFTER A NIMUM AMOUNT DUE FLORIDA DEPART Sandra B Secretary DIVISION OF CO	MENT OF STATE Mortham of State	75.)				
OCUM	ENT # J9952	22	2 (1)						
Corporation N	larile —		()						
PAHAMC	OUNT PROPERTIES, INC	٠.							
incipal Place o	f Business	Mail	ing Address			- 	13 II.O.10 II.O.1	I BIUII BIUII U	INII BINII DINII DINII INDI
3990 SHERIDAY SUITE 209		S	990 SHERIDAN ST UITE 209					C 500	of Law Poppy
HOLLYWOOD F	FL 33021	H U	OLLYWOOD FL 33021 S			3. Date Incorporated or Qua 10/26/1987	alihed	_	of Last Report 24/1995
Principal Plac	e of Business	2a.	Mailing Address			4. FEI Number		L	Applied For
		26	Suite, Apt. #, etc.			65-0013071			Not Applicable \$8.75 Additional
Suite, Apt #,	etc	27	oune, Apr #, tile			5. Certificate of Status Des-	red	<u> </u>	Fee Required
City & State	4	28	City & State			6. Election Campaign Finan Trust Fund Contribution			\$5.00 May Be Added to Fees
Zip	Country		Zip	Country		This corporation has liab Florida Statutes	Hity for int	tangible ta	x under s. 199.032, No
	9. Name and Address of Cur	29 rent Registe	ered Agent	30		10. Name and Address of N	New Regi	<u> </u>	
	HWARTZ, JOSEPH L. O SHERIDAN STREET				me eet Addr	ess (P.O. Box Number is Not Ad	cceptable	e)	
404 HOI	O SHERIDAN STREET LLYWOOD FL 33021 I the provisions of Sections 607.			83 84 Cit	eet Addr	and an automic this statement to	or the nur	FL revise of cl	85 Zip Code nanging its registered tment as registered
404 HOI	O SHERIDAN STREET LLYWOOD FL 33021 The provisions of Sections 607.4 pistered agent, or both, in the St familiar with, and accept the ob-	ate of Florida oligations of,	Section 607.0505, Fig	82 Str 83 84 Cit es, the above namulthorized by the conda Statutes	eet Addr y ned corp corporati	oration submits this statement fon's board of directors. I hereby	or the pur accept t	FL rpose of cl the appoin	nanging its registered trient as registered
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SIGNATURE:

HOWARD B BERMAN PRESIDENT 6-06-96 (35) 933-3476
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR