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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K22341

(7)

LAS PALMAS RESORT, INC.

FILED
May 05 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address  600 E. CANFIELD ST. 2455 E. SUNRISE BLYD.																	
333 N. NEW RIVER D., E. 2000 RIVERWALK PLZ #30						#300					DO NOT WRITE IN THIS SPACE						
US						U\$					ĺ	3.	Date Incorporated or Qualifi 04/25/1988	ed			
2.	Principal P	pal Place of Business				2a. Mailing Address						4.	FEI Number		AF	pplied For	
21						26						<u> </u>	<u>59-2899801</u>	<del> </del>		ot Applicable	
22	Suite, Apt. #, etc.					Suite, Apt. #, etc.						5.	Certificate of Status Desired		\$8.75 / Fee Re	Additional equired	
	City & State					City & State						6.	Election Campaign Financin	q	\$5.00	May Be	
23	3					28						Trust Fund Contribution Added to Fees					
	Ziρ		Cc	untry		Zip		Cou	intry			8.	This corporation owes or ha	s paid the ci	urrent year Int	angible	
24			25			29	V. 81 Per	30					Personal Property Tax due .			No	
9. Name and Address of Current Registered Agent												10.	Name and Address of Nev	Registered	J Agent		
BERGER, DELVI C/O <b>SIL</b> VESTRE PROPERTIES, INC.									81 82	Name Street	Addres	ss (P	O. Box Number is Not Acce	ptable)			
2455 E. SUNRISE BLVD.																	
FT. LAUDERDALE FL 33304									83								
										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.														s registered registered			
SIGNATURE Signature, typed or protect nature of rightered agest, and the disoplicable (NOTE: Registered Agent signature required when reinstating)  DATE																	
12		Signature, typica	TO THE SEC			IRECTORS	likon	13.	o Age	in aignaiore	: 1800 100		ADDITIONS/CHANGES TO O		ID DIRECTOR	S IN 12	
717		71					DELETE	1.1 TI	TLE					oznoru	Change	Addition	
NA.		BERGEI	R. DEL	VI				1.2 N									
STREET ADDRESS 2455 E. SUNRISE BLVD., #300			#300	138				1.3 STREET ADDRESS									
	Y-ST-ZIP	FT. LAU						1	ITY-S							ì	
TIT		5					DELETE	211			<del> </del>				Change	Addition	
NA	- 1	BERGE	R. ALE	XANDRE				2.2 N	AMF						_ •	_	
	REET ADDRESS			RISE BLVD.,	#300			1		ADDRESS	1					1	
	Y-ST-ZIP	FT. LAL								ST-ZIP							
TIT							DELETÉ	3.1 TI			<del>                                     </del>	-	<del>,</del>	·	Change	☐ Addition	
NA.	- · · · · · · · · · · · · · · · · · · ·							3.2 N	AME		1				_ •	_	
	REET ADORESS									ADDRESS	1						
	Y-ST-ZIP							1		ST - ZiP							
TIT							DELETE	4.1 Tr		. 411	<del></del>			····	Change	Addition	
NA.	1							4.2 N			]				_ •	- j	

14. I hereby certify that the information supplied with this filling 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 supplimental globular 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 corporator of the corporator of the corporator of the statutes; and that my name appears in Block 12 or Block 13 if changed to manufacture in with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY- ST - ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

CICALATUDE.

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME

TITLE

NAME

4/13/9P (954)561-1900

Change

☐ Change

Addition

☐ Addition