FILE NOW: FILING FEE A	FTER MAY 1 IS \$	225.0	00	1		
PROFIT CORPORATION ANNUAL REPORT 1996	FLORIDA DEPARTMENT OF STATE  Sandra B. Mortham  Secretary of State  DIVISION OF CORPORATIONS					
DOCUMENT # K48457  1. Corporation Name  2880 South Ocean Corp.						
Principal Place of Business  1645 Palm Beach Lakes Blvd. Suite 400 West Palm Beach, FL 33401  Mailing Address  1645 Palm Beach Lakes Blvd. Suite 400 West Palm Beach, FL 33401				3. Date incorporated or Qualified 12/01/88	3a. Date of L. 05/03	
Principal Place of Business     Suite, Apt # etc	28. Mailing Address 26. Suite. Apt. #. etc.			4. FEI Number 65-0085938 5. Certificate of Status Desired		Applied For Not Applicate 8.75 Additional Fee Required
City & State  23  Zip  Country	27   City & State   28   Zip	Country		6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability for Florida Statutes Yes		\$5.00 May Be Added to Fees under s 199 032.
24 25 25	29 30	1-		10. Name and Address of New Ro		nt
9. Name and Address of Current Registered Agent Gary N. Gerson 1645 Palm Beach Lakes Boulevard Suite 1200			Name Street Addre	ess (P.O. Box Number is Not Accepta		
West Palm Beach, Florida 3.  11. Pursuant to the provisions of Sections 607 0502 office or registered agent, or both, in the State of agent 1 am familiar with, and accept the obligation.	and 607.1508. Florida Statutes.	the above norized by ia Statutes	City -nameo corp the corporat	poration submits this statement for the ion's board of directors. I hereby according to the contract of the co	FL ourspee of chi	anging its registere
CICNATURE				red when reinstating)	DATE	
Signature Typed or printed hamst of registered agent		13,	on ingroup or creature	ADDITIONS/CHANGES TO OFF	ICERS AND DI	RECTORS IN 12
III. D,P,S,T	DELETE	1 1 TITLE 12 NAME				Change Addi

	o the provisions of Sections 607 0502 and 607 1508. Florida Statutes agistered agent, or both, in the State of Florida. Such change was at In familiar with, and accept the obligations of, Section 607 0505. Flor		orporation's board of directors. I hereby accept the appointment as registered
SIGNATURE _	Signature (species presented name of registered agent and little if applicable) (BAQTE	Begistered Agent signative in	rquired when reinstating! DATE
	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	DELETE	1 1 TITLE	Change Addition
TITLE	D,P,S,T John C. Metz	1.2 NAME	
NAME		1 3 STREET ADDRESS	
STREET ADDRESS	8008 Flagler Drive	1.4 CITY - ST - ZIP	
CITY-ST-ZIP	West Palm Beach, FL 33401	2 1 TITLE	Change Addition
TITLE	. Deceie		
NAME		2 2 NAME	
STREET ADDRESS		2 3 STREET ADDRESS	
CITY - ST - ZIP		2 4 CITY - ST - ZIP	Change Addition
TITLE	DELETE	3 1 TITLE	
NAME		3 2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	Change Addition
TIFLE	DELETE	4 1 TITLE	Change Addition
NAMÉ		4 2 NAME	
		43 STREET ADORESS	
STREET ADDRESS		44 CITY ST-ZIP	
CITY-ST 7IP	DELETE	5 1 TIPLE	200001789182 Crange Addition
TIFLE		5.2 NAME	-04/22/9601071026
NAME			***600.00
STREET ADDRESS		5 3 STREET ADDRESS	مالمع المعالم
CITY ST-ZIP	I Located	5 4 CITY - ST - ZIP	Additio
TITLE	ÜĒLETE	6 I TITLE	4-172,
NAME		6 2 NAME	·
STREET ADDRESS		6 3 STREET ADDRESS	<b>)</b>
017/2 61 3/15		6 4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statules, I further certify that the information indicated on this enfual 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 birector of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statules, and that my name appears in Block 13 or Block 13 or process.

John C. Metz

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

03/19/96

(407) 585-4412

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

Daytime Prone #