

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # K68590 (4)

1. Corporation Name

HOLIDAY HARBOR MANAGEMENT CORPORATION



Principal Place of Business

C/O PHILIP A. MOHAMMAD  
8750 DORAL BLVD.  
MIAMI FL 33178-9402

Richard SASSI

Mailing Address

C/O CITIBANK LEGAL DEPT  
ONE SANSOME ST 27TH FLOOR  
SAN FRANCISCO CA 94104  
US

3. Date Incorporated or Qualified

02/27/1989

3a. Date of Last Report

01/30/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

65-0125632

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SASSI, RICHARD M  
8750 DORAL BLVD.  
MIAMI FL 33178

81 Name

Richard SASSI

82 Street Address (P.O. Box Number is Not Acceptable)

8750 DORAL Blvd.

83

84 City

Miami

FL

85 Zip Code

33178

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

Signature, typed or printed name of registered agent and title, if applicable

(If Not Registered Agent Signature Required When Retaining)

DATE

12. OFFICERS AND DIRECTORS

TITLE	VA	<input type="checkbox"/> DELETE
NAME	SASSI, RICHARD	
STREET ADDRESS	8750 DORAL BLVD.	
CITY-ST-ZIP	MIAMI FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	LOCK, DALE C	
STREET ADDRESS	ONE SANSOME STREET 27TH FLOOR	
CITY-ST-ZIP	SAN FRANCISCO CA	
TITLE	P	<input type="checkbox"/> DELETE
NAME	MCAUSLAN, ROBERT	
STREET ADDRESS	4041 N. CENTRAL AVE.	
CITY-ST-ZIP	PHOENIX AZ 85012	
TITLE	VDA	<input checked="" type="checkbox"/> DELETE
NAME	PARIS, ALVIN	
STREET ADDRESS	8750 DORAL BLVD.	
CITY-ST-ZIP	MIAMI FL 33178	
TITLE	VA	<input type="checkbox"/> DELETE
NAME	HERBIG, JUDITH A	
STREET ADDRESS	4041 N. CENTRAL AVE.	
CITY-ST-ZIP	PHOENIX AZ 85012	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	400001778614
24 CITY-ST-ZIP	-04/12/96--01061--026
	***200.00
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	AS
43 STREET ADDRESS	Amy D. Howland
44 CITY-ST-ZIP	4041 N. Central Ave., 3rd Floor
	Phoenix, AZ 85012
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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

Richard M. Sassi

(305) 599-5807

Date:

Daytime Phone #

CR2E034 (12/95)

98-21-4