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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K92211

(7)

TURNBERRY CONSTRUCTION, INC.

FILED Mar 05 1997 8:00am Secretary of State

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Principal Place	a of Diagraph	Mailing Address			. BABIN BABIN DIBIN DIBIN BABIN ALBUM		
2875 NW 191S		2075 NW 191ST ST					
SUITE 400		SUITE 400					
AVENTURA FL US	33180	aventura fl 33180-2831 US		3. Date Incorporated or Qualified 05/31/1989	3a. Date of Last Report 02/14/1996		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For		
21 Suite. Apt. #. etc. 22		26 Suite, Apt. #, etc. 27		65-0123046	Not Applicable		
				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	e	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Country	8. This corporation has liability for			
4	25		30		Yes X No		
	9. Name and Address of Curre	nt Registered Agent	041	10, Name and Address of New Re	gistered Agent		
	RELLO, RAYMOND		81 Name				
	2 S UNIVERSITY DR		82 Street Ad	Idress (P.O. Box Number is Not Acceptab	ole)		
DAV	/IE FL 33324						
			83				
			84 City	· · · · · · · · · · · · · · · · · · ·	85 Zip Code		
					FL S EPOCK		
office or r agent. I a	registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was au gations of, Section 607.0505, Flor	uthorized by the corpor rida Statutes.	orporation submits this statement for the pretion's board of directors. I hereby accept	of the appointment as registered		
SIGNATURE.	Signature, typed or printed name of registered ag	gent and title I applicable (NOTE	Registered Agent signature rec	quired when reinstating)	DATE		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12		
ITLE	P	☐ DELETE	1.1 TITLE		Change Addition		
BAME	SOFFER, DONALD		1.2 NAME				
STREET ADORESS	2875 NE 191ST ST #400		1.3 STREET ADDRESS				
CHY-ST-ZIP	AVENTURA FL		1.4 CITY - ST - ZIP				
1716	D	DELETE	2.1 TITLE		Change Addition		
NAME	REDLICH, BERNARD		22 NAME				
STREET ADDRESS	2875 NE 191ST ST #400		2.3 STREET ADDRESS				
CITY - S1 - ZIP	AVENTURA FL	FITT WELL AND ALL TO THE PROPERTY OF THE PARTY OF THE PAR	2. 4 CITY - \$1 - ZIP				
TILE	D	☐ DELETE	3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Additio		
NAME	REDLICH, LEONARD		3.2 NAME				
STREET ADDRESS	2875 NE 191ST ST #400		3.3 STREET ADDRESS				
CHTY-\$1-ZIP	AVENTURA FL	TT ASSESS	34. CITY-ST-ZIP		06 114600		
HCF	D PECCIED FINENE	DELETE	4.1 TITLE		Change		
NAME	KESSLER, EUGENE 2875 NE 191ST ST #400		4 2 NAME				
STREET ADDRESS			4 3 STREET ADDRESS				
CHTY-ST-ZiF	AVENTURA FL	- Delete	4.4 CITY - ST - ZIP		Change Additio		
TITLE		DELETE	5.1 TITLE		Change Additio		
NAME:			5.2 NAME	•			
STREET ADDRESS			5.3 STREET ADDRESS				
DITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP		Change Additio		
TATLE		L DETER	6.1 TITLE		Financial Financial		
NAME			6.2 NAME				
STREET ADDRESS	l		6.3 STREET ADDRESS				
CITY - ST - 7IP			6.4 CITY - ST - ZIP				

14. I do 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 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:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/97

305/937-6200 Daystre Priors