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

FILED
May 15 1998 8:00am
Secretary of State

DOCUMENT # **K92211** **(7)**

1. Corporation Name
TURNBERRY CONSTRUCTION, INC.

Principal Place of Business
2875 NW 191ST ST
SUITE 400
AVENTURA FL 33180
US

Mailing Address
2875 NW 191ST ST
SUITE 400
AVENTURA FL 33180
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/31/1989

4. FEI Number
65-0123046
[ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [ ] Yes [X] No

2. Principal Place of Business
21 19501 Biscayne Blvd Attn: Legal Dept
Suite, Apt. #, etc.
22 Suite 400
City & State
23 Aventura, Fl.
Zip 24 33180
Country 25 USA

2a. Mailing Address
26 19501 Biscayne Blvd Attn: Legal Dept
Suite, Apt. #, etc.
27 Suite 400
City & State
28 Aventura, Fl.
Zip 29 33180
Country 30 U.S.A.

9. Name and Address of Current Registered Agent
PARELLO, RAYMOND
1972 S UNIVERSITY DR
DAVIE FL 33324

10. Name and Address of New Registered Agent
81 Name
Mario Romine
82 Street Address (P.O. Box Number is Not Acceptable)
19501 Biscayne Blvd
83
Suite 400
84 City
Aventura
FL 85 Zip Code 33180

11. Pursuant to the provisions of Section 607.0505 and 607.1505, 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: Mario A. Romine MARIO A. ROMINE 4-24-98
(Registered Agent Signature) (Print Name of Registered Agent) (Date)

12. OFFICERS AND DIRECTORS

TITLE	P	[ ] DELETE
NAME	SOFFER, DONALD	
STREET ADDRESS	2875 NE 191ST ST #400	
CITY ST ZIP	AVENTURA FL	
TITLE	D	[ ] DELETE
NAME	REDLICH, BERNARD	
STREET ADDRESS	2875 NE 191ST ST #400	
CITY ST ZIP	AVENTURA FL	
TITLE	D	[ ] DELETE
NAME	REDLICH, LEONARD	
STREET ADDRESS	2875 NE 191ST ST #400	
CITY ST ZIP	AVENTURA FL	
TITLE	D	[ ] DELETE
NAME	KESSLER, EUGENE	
STREET ADDRESS	2875 NE 191ST ST #400	
CITY ST ZIP	AVENTURA FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY ST ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P	[X] Change [ ] Addition
12 NAME	Soffer, Donald	
13 STREET ADDRESS	19501 Biscayne Blvd., Suite 400	
14 CITY ST ZIP	Aventura, Fl. 33180	
21 TITLE	D	[X] Change [ ] Addition
22 NAME	Redlich, Bernard	
23 STREET ADDRESS	19501 Biscayne Blvd, Suite 400	
24 CITY ST ZIP	Aventura, Fl. 33180	
31 TITLE	D	[X] Change [ ] Addition
32 NAME	Redlich, Leonard	
33 STREET ADDRESS	19501 Biscayne Blvd, Suite 400	
34 CITY ST ZIP	Aventura, Fl. 33180	
41 TITLE	D	[X] Change [ ] Addition
42 NAME	Kessler, Eugene	
43 STREET ADDRESS	19501 Biscayne Blvd, Suite 400	
44 CITY ST ZIP	Aventura, Fl. 33180	
51 TITLE		[ ] Change [ ] Addition
52 NAME		
53 STREET ADDRESS		
54 CITY ST ZIP		
61 TITLE		[ ] Change [ ] Addition
62 NAME		
63 STREET ADDRESS		
64 CITY ST ZIP		

CR2E034 (10/97)

14. I hereby certify that the information supplied with this filing complies with the requirements of Section 119.07(3)(i), 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 a receiver or trustee or another individual authorized 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 any attached sheet with an address.

SIGNATURE: DONALD SOFFER 4/24/98 (305) 937-6200