

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

FILED
Jan 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L51921 (9)
 1. Corporation Name
F & R DEVELOPMENT CORP.



Principal Place of Business 444 BRICKELL AVE. SUITE 1001 MIAMI FL 33131	Mailing Address 444 BRICKELL AVE. SUITE 1001 MIAMI FL 33131-2407
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 02/19/1990	3a. Date of Last Report 03/21/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 65-0186218	Applied For Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip	28 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip	25 Country	29 Zip	30 Country
g. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

g. Name and Address of Current Registered Agent
SCHRAM, RONALD Y.
444 BRICKELL AVE.
SUITE 1001
MIAMI FL 33131

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City
 85 Zip Code **FL**

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 file. Tag #12345) (NOTE: Registered Agent Signature Required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE	
	DVS	SCHRAM, RONALD Y	1420 N. OCEAN BLVDE S	PALM BEACH FL 33480	
	DP	HESEL, FRANK JAY	444 BRICKELL AVE.	MIAMI FL 33131	
	DVT	MOGEE, FRANKLIN A	444 BRICKELL AVE.	MIAMI FL 33131	
				<input type="checkbox"/> DELETE	
				<input type="checkbox"/> DELETE	
				<input type="checkbox"/> DELETE	
				<input type="checkbox"/> DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	D/V/S			
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	D/P			
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	D/V/T/S			
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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: *[Signature]* **F A M. GEE** 1/29/97 305-277-3342

CR2E034 (9/96)