

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

FILED
Apr 21 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 # **L73885** (0)
1. Corporation Name
OCEAN RIDGE COMMERCIAL CORP.

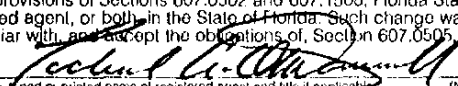


Principal Place of Business 2050 E. OAKLAND PARK BLVD., #209 SUITE 209 FT. LAUDERDALE FL 33306	Mailing Address 2050 E. OAKLAND PARK BLVD., #209 SUITE 209 FT. LAUDERDALE FL 33306-1121
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 05/18/1990	3a. Date of Last Report 05/01/1996
				4. FEI Number 65-0208384	Applied For <input type="checkbox"/> Not Applicable
				5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent RICHMOND, HEATHER 2050 E. OAKLAND PARK BLVD., #209 FT. LAUDERDALE FL 33306				10. Name and Address of New Registered Agent 81 Name O'DONNELL, Michael A. 82 Street Address (P.O. Box Number is Not Acceptable) 2050 E. Oakland Park Blvd. 83 Suite 209 84 City Fort Lauderdale FL 85 Zip Code 33306	
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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  DATE **4/15/97**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	P/S/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RICHMOND, HEATHER			1.2 NAME	MEYER, Luke		
STREET ADDRESS	2050 E OAKLAND PARK BLVD / STE - 209			1.3 STREET ADDRESS	2050 E. Oakland Park Blvd., Ste. 209		
CITY-ST-ZIP	FT LAUDERDALE FL			1.4 CITY-ST-ZIP	fort Lauderdale, FL 33306	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	PST	<input checked="" type="checkbox"/> DELETE		2.1 TITLE			
NAME	RICHMOND, HEATHER			2.2 NAME			
STREET ADDRESS	2050 E. OAKLAND PK BLVD.			2.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL			2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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 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, changed, or on an attachment with an address.

SIGNATURE  DATE **4/15/97**

CR2E034 (9/96)