

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

**FILED**  
**Feb 14 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

**DOCUMENT # M06237**  
 1. Corporation Name  
**REGENT HOLDING CORPORATION**

**(5)**



Principal Place of Business  
**3710 N. 37TH TERRACE  
 HOLLYWOOD FL 33021**

Mailing Address  
**3710 N. 37TH TERRACE  
 HOLLYWOOD FL 33021-2500**

3. Date Incorporated or Qualified **10/08/1984** 3a. Date of Last Report **03/08/1996**

21. Principal Place of Business	2a. Mailing Address	4. FEI Number <b>59-2456355</b>	Applied For <input type="checkbox"/> Not Applicable
22. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
24. Zip	28. Zip	6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
25. Country	29. Country		

**9. Name and Address of Current Registered Agent**

**ROSE, LAWRENCE N  
 133 SEVILLA AVENUE  
 CORAL GABLES FL 33134**

**10. Name and Address of New Registered Agent**

81. Name	<b>Rose Lawrence</b>
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	<b>2925 Aventura Blvd Suite 308</b>
84. State	<b>FL</b>
85. Zip Code	<b>33180</b>

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PD</b>	1.1 TITLE	<b>v/s</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GHTIS, LEO</b>	1.2 NAME	
STREET ADDRESS	<b>3710 N 37TH TERR</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>HOLLYWOOD FL 33021</b>	1.4 CITY - ST - ZIP	
TITLE	<b>S</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>ROSEN, LAWRENCE N</del>	2.2 NAME	
STREET ADDRESS	<del>133 SEVILLA AVE</del>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<del>CORAL GABLES FL 33134</del>	2.4 CITY - ST - ZIP	
TITLE	<b>P</b>	3.1 TITLE	<b>PD</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GILINSKI, ISSAC</b>	3.2 NAME	
STREET ADDRESS	<b>3710 N 37 TERRACE</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>HOLLYWOOD FL</b>	3.4 CITY - ST - ZIP	
TITLE		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		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		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: *Leo Ghitis* **Feb 7/97 (305) 828-7008**

CR2E034 (9/96)