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Mar 13 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 # M09798

(3)

1. Corporation Name
HOLLYWOOD BEACH RESORTS, INC.



Principal Place of Business

3300 N. SURF ROAD
HOLLYWOOD FL 33019
US

Mailing Address

3300 N. SURF ROAD
HOLLYWOOD FL 33019-3800
US

3. Date Incorporated or Qualified
01/09/1985

3a. Date of Last Report
10/16/1996

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

4. FEI Number

59-2490120

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 has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

LIGHTMAN & JOBLOVE, P.A.
8211 W. BROWARD BLVD., SUITE 310
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0802 and 607.1506, 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 of Registered Agent or Officer or Director)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

12.1	NAME	PD WOLCZIK, HORST	DELETE
12.2	STREET ADDRESS	3300 NORTH SURF ROAD	
12.3	CITY-STATE-ZIP	HOLLYWOOD FL 33019	
12.4	TITLE		DELETE
12.5	NAME		
12.6	STREET ADDRESS		
12.7	CITY-STATE-ZIP		
12.8	TITLE		DELETE
12.9	NAME		
12.10	STREET ADDRESS		
12.11	CITY-STATE-ZIP		
12.12	TITLE		DELETE
12.13	NAME		
12.14	STREET ADDRESS		
12.15	CITY-STATE-ZIP		
12.16	TITLE		DELETE
12.17	NAME		
12.18	STREET ADDRESS		
12.19	CITY-STATE-ZIP		
12.20	TITLE		DELETE
12.21	NAME		
12.22	STREET ADDRESS		
12.23	CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	TITLE	Change	Addition
13.2	NAME		
13.3	STREET ADDRESS		
13.4	CITY-STATE-ZIP		
13.5	TITLE	Change	Addition
13.6	NAME		
13.7	STREET ADDRESS		
13.8	CITY-STATE-ZIP		
13.9	TITLE	Change	Addition
13.10	NAME		
13.11	STREET ADDRESS		
13.12	CITY-STATE-ZIP		
13.13	TITLE	Change	Addition
13.14	NAME		
13.15	STREET ADDRESS		
13.16	CITY-STATE-ZIP		
13.17	TITLE	Change	Addition
13.18	NAME		
13.19	STREET ADDRESS		
13.20	CITY-STATE-ZIP		

14. I, the undersigned, 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 included 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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HORST WOLCZIK
President

3/7/97 954-923-4516

CR2E034 (9/96)