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165.00

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Jun 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N29279 (9)
1. Corporation Name
BERKELEY SQUARE ACQUISITION CORPORATION



Principal Place of Business Mailing Address
C/O LORRAINE MANALILI
1505 SOUTH OCEAN BLVD.
BOCA RATON FL 33432

3. Date Incorporated or Qualified 11/15/1988
3a. Date of Last Report 03/29/1996
4. FEI Number 65-0130029
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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country
24 25 29 30

9. Name and Address of Current Registered Agent
MANALILI, LORRAINE
1505 SOUTH OCEAN BLVD.
BOCA RATON FL 33432

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE DP DELETE
NAME BADOUR, PATRICK
STREET ADDRESS 1503 SO. OCEAN BLVD.
CITY-ST-ZIP BOCA RATON FL 33432
TITLE VPB DELETE
NAME MCLEAN, GLADYS
STREET ADDRESS 1501 SO. OCEAN BLVD.
CITY-ST-ZIP BOCA RATON FL 33432
TITLE DT DELETE
NAME MANALILI, LORRAINE
STREET ADDRESS ~~1501 SO. OCEAN BLVD.~~
CITY-ST-ZIP BOCA RATON FL 33432
TITLE DB DELETE
NAME MADICA, JOSEPH
STREET ADDRESS 1503 SO. OCEAN BLVD.
CITY-ST-ZIP BOCA RATON FL 33432
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
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME Petro Contompais V.P.D.
2.3 STREET ADDRESS 1501 South Ocean Blvd
2.4 CITY-ST-ZIP Boca Raton, FL 33432
3.1 TITLE Change Addition
3.2 NAME Lorraine Manalili DT
3.3 STREET ADDRESS 1505 So. Ocean Blvd
3.4 CITY-ST-ZIP Boca Raton FL 33432
4.1 TITLE Change Addition
4.2 NAME DS Joanne Annalone
4.3 STREET ADDRESS 1507 So Ocean Blvd
4.4 CITY-ST-ZIP Boca Raton, FL 33432
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME 500002216615
6.3 STREET ADDRESS -06/18/97--01003--014
6.4 CITY-ST-ZIP ***165.00

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE SIGNATURE OF REGISTERED AGENT

CR2E037 (9/96)