

4-15-98 B 4803 C
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FILED
 Apr 15 1998 8:00am
 Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N97000005817 (8)
 1. Corporation Name
 TORAS EMES OF BOCA RATON, INC.



Principal Place of Business: 7499 SAN SEBASTIAN DRIVE BOCA RATON FL 33433
 Mailing Address: 7499 SAN SEBASTIAN DRIVE BOCA RATON FL 33433

3. Date Incorporated or Qualified: 10/15/1997
 4. FEI Number: 65-0788118
 Applied For: Not Applicable

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-28) fields for Suite, City & State, Zip, and Country.

5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
 7. Is this nonprofit corporation a homeowners association? [X] Yes [] No
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [] Yes [X] No

9. Name and Address of Current Registered Agent
 ROTH, JEFFREY
 7499 SAN SEBASTIAN DRIVE
 BOCA RATON FL 33433

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS (DELETE) fields for Title, Name, Street Address, City-ST-ZIP.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (CHANGE/ADDITION) fields for Title, Name, Street Address, City-ST-ZIP.

14. I 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 in an attachment with an address.

SIGNATURE: _____ DATE: 4/8/98 5613918238

CR2E037 (10/97)