## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED
Jan 29, 2004 08:00 AM
Secretary of State

DOCUM	IENT	# F	PO1	00	0057	′529
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1. Entity Name

HOLLYWOOD BEACH HOTEL INVESTMENT REALTY,



Principal Place of Business

% BAUMAN & KANNER, P.A. 7119 W. BROWARD BLVD. PLANTATION, FL 33317 Mailing Address

101 N OCEAN DR

HOLLYWOOD BEACH, FL 33019



01052004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-1118229 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHECHER, RICHARD J % BAUMAN & KANNER, P.A. 7119 W. BROWARD BLVD. PLANTATION, FL 33317

changed, or on an attachment with

SIGNATURE:

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	named entity submits this statement for the pions of registered agent.	ourpose of changing its registe	ered office or re	agistered agent, or bo	th, In the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	(NOTE Registr	ered Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.			
10.	OFFICERS AND DIREC	CTORS		-1	e who manufactured the second
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHECHER, RICHARD J 500 CRAIG ROAD MANALAPAN, NJ 07726				U00000020321
TITLE NAME STREET AODRESS CITY-ST-ZIP					01/29/04-80061-022 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12.   hereby of indicated	certify that the information supplied with the on this report or supplemental report in the receiver or truster.	ling does not qualify for the earn and that my sign	xemption state	d in Section 119.07(3) te the same legal effection 503. Floridge	(i), Florida Statutes. I further certify that the information of as if made under eath; that I am an officer or director

like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR