

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P37771 (3)**
1. Corporation Name
HOLLYWOOD, INC. (FLAMINGO)



Principal Place of Business: **200 SOUTH PARK ROAD - #200 HOLLYWOOD FL 33021**
Mailing Address: **200 SOUTH PARK ROAD - #200 HOLLYWOOD FL 33021**

3. Date Incorporated or Qualified: **03/05/1992** 3a. Date of Last Report: **04/26/1995**
4. FEI Number: **65-0318734** 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

2. Principal Place of Business: 21, 22, 23
2a. Mailing Address: 26, 27, 28
24. Zip: **33021** 25. Country: 29. Zip: **33021** 30. Country:

9. Name and Address of Current Registered Agent: **STOTZER, THEODORE R. 200 SOUTH PARK ROAD - #200 HOLLYWOOD FL 33021**
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code: **FL 33021**

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 re-registering) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PC	NAME: SWERDLOW, MICHAEL J.	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 200 S. PARK ROAD, #200	CITY-ST-ZIP: HOLLYWOOD FL	1.2 NAME	
TITLE: D	NAME: SWERDLOW, MICHAEL J.	1.3 STREET ADDRESS	
STREET ADDRESS: 200 S. PARK ROAD, #200	CITY-ST-ZIP: HOLLYWOOD FL	1.4 CITY-ST-ZIP	
TITLE: VS	NAME: STOTZER, THEODORE R	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 200 S PARK RD, #200	CITY-ST-ZIP: HOLLYWOOD FL	2.2 NAME	
TITLE: <input type="checkbox"/> DELETE	NAME:	2.3 STREET ADDRESS	
STREET ADDRESS:		2.4 CITY-ST-ZIP	
TITLE: <input type="checkbox"/> DELETE	NAME:	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:		3.2 NAME	
CITY-ST-ZIP:		3.3 STREET ADDRESS	
TITLE: <input type="checkbox"/> DELETE	NAME:	3.4 CITY-ST-ZIP	
STREET ADDRESS:		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP:		4.2 NAME	
TITLE: <input type="checkbox"/> DELETE	NAME:	4.3 STREET ADDRESS	
STREET ADDRESS:		4.4 CITY-ST-ZIP	
CITY-ST-ZIP:		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: <input type="checkbox"/> DELETE	NAME:	5.2 NAME	
STREET ADDRESS:		5.3 STREET ADDRESS	
CITY-ST-ZIP:		5.4 CITY-ST-ZIP	
TITLE: <input type="checkbox"/> DELETE	NAME:	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:		6.2 NAME	
CITY-ST-ZIP:		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

200001800952
-04/30/96--01043--018
*****208.75**

4-30-96
JR

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 if changed, or on an attachment with an address.

SIGNATURE: _____ DATE: **3/27/96** (954) 981-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **Michael Swerdlow, President/Chairman** Daytime Phone #

CR2E034 (12/95)