

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 31 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P93000010258 (0)**

1. Corporation Name
SILVER PALMS HOLDING CORP.



Principal Place of Business 1550 N.E. MIAMI GARDENS DR. NORTH MIAMI BEACH FL 33179	Mailing Address 1550 N.E. MIAMI GARDENS DR. NORTH MIAMI BEACH FL 33179-4836
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/09/1993		3a. Date of Last Report 01/29/1996	
21		26		4. FEI Number 65-0387758		Applied For Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
24 Zip	25 Country	29 Zip	30 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

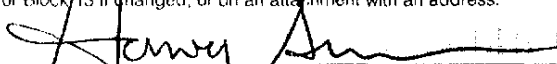
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ROSENBERG, DONALD S 1 S.E. 3RD AVE. SUITE 2800 MIAMI FL 33131				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City FL 85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	DP BIGGS, WILLIAM	1550 N.E. MIAMI GARDENS DRIVE	NORTH MIAMI BEACH FL				
	D KISLAK, JAY I	7900 MIAMI LAKES DRIVE WEST	MIAMI LAKES FL 33016				
	V SIMON, HARVEY I	1550 N.E. MIAMI GARDENS DR.	NORTH MIAMI BEACH FL 33179				
	VST HIME, MOLLY A	1550 N.E. MIAMI GARDENS DR.	NORTH MIAMI BEACH FL 33179				

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

SIGNATURE:  1-21-97 945-1800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
0243347

CR2E034 (9/96)