

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

FILED

Feb 18 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 # P93000014416 (0)

1. Corporation Name

TANGLEWOOD LAKES, INC.

Principal Place of Business

3300 UNIVERSITY DR.
SUITE 412
CORAL SPRINGS FL 33065

Mailing Address

3300 UNIVERSITY DR.
SUITE 412
CORAL SPRINGS FL 33065-6309



3. Date Incorporated or Qualified 02/25/1993	3a. Date of Last Report 02/19/1996
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2. Principal Place of Business	2a. Mailing Address
21 2255 Glades Road Suite, Apt. #, etc. 22 Suite 301 E City & State 23 Boca Raton, Fl. Zip 24 33431	26 2255 Glades Road Suite, Apt. #, etc. 27 Suite 301 E City & State 28 Boca Raton, Fl. Zip 29 33431

4. FEI Number 65-0390221	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No

g. Name and Address of Current Registered Agent

~~KODSI, ISAAC P~~
~~2875 SOUTH UNIVERSITY DRIVE~~
~~DAVIE FL 33328~~

10. Name and Address of New Registered Agent

81 Name Kodsi & Eisenstein, P.A.	82 Street Address (P.O. Box Number is Not Acceptable) 701 West Cypress Creek Road	83 Suite 302	84 City Ft. Lauderdale	FL	85 Zip Code 33309
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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


Signal re. typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

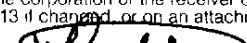
DATE

2/12/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KODSI, JOSEPH	1.2 NAME	
STREET ADDRESS	3300 UNIVERSITY DR., SUITE 412	1.3 STREET ADDRESS	2255 Glades Road, Suite 301 E
CITY-ST-ZIP	CORAL SPRINGS FL	1.4 CITY-ST-ZIP	Boca Raton, Fl. 33431
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KODSI, DANIEL	2.2 NAME	
STREET ADDRESS	3300 UNIVERSITY DR STE 412	2.3 STREET ADDRESS	2255 Glades Road, Suite 301 E
CITY-ST-ZIP	CORAL SPRINGS FL	2.4 CITY-ST-ZIP	Boca Raton, Fl. 33431
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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



2/12/97

CR2E034 (9/96)