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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P93000014416 (0)

TANGLEWOOD LAKES, INC.

FILED Apr 24 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							TOPE OGEN (1811 DIS			
2255 GLADES RD STE 301 E BOCA RATON FL 33431 US		2255 GLADES RD STE 301 E BOCA RATON FL 33431 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/25/1993				
2. Principal Place of Business 21 1499 W. Palwetto Park Road 26 1499 W. Palm			the Park Road			4. FEI Number		- 	pplied For	1
Suite, Apt. #, etc. Suite, Apt. #, etc.			110 01	IC KU	VV	65-0390221			ot Applicable Additional	┨
22 Suit	200	27 Suite 200		_		5. Certricate of Status Desired Fee Required				
City & State	Raton Florida	28 Boca Ration Florida				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip Country		Country				8. This corporation owes or has paid the current year Intangible				
24 5548	8. Name and Address of Current Registered Agent					Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
		10. Name and Address of New F	registered Ag	ent ·	***************************************	┨				
	DSI & EISENSTEIN	'	8,	Name						
701 W CYPRESS CREEK RD 302			82	2 Street	et Address (P.O. Box Number is Not Acceptable)					
FT	LAUDERDALE FL 33309		8	3						1
			84	1 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										
12.	Signature, typed or printed name of registrired agon OFFICERS AND		Registered A	gent signatur	e required	when reinstating)	DATE	INFOTOL	DO IN 10	١٤
TITLE	P	DELETE	1.1 TITLE		Τ	ADDITIONS/CHANGES TO OFF		Change	Addition	ł
NAME	KODSI, JOSEPH		1.2 NAME		Ì				_	E
STREET ADDRESS	2255 GLADES RD STE 301E			T ADDRESS	149	3 W Arlmotites Park	Road	into	200	8
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY -		PYX	9 W. Admetto Bork a Ratun FL 3349	8/2	A (1) <	800	ľ
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NAME) -		6.2 NAME		1					
STREET ADDRESS			J	TADDRESS	j				į	1
CITY-ST-ZIP	pertify that the information supplied with	this filing does not qualify for	6.4 CITY-		ad in Sc	action 119 07(3)(i) Florida Statutas	I further coals	that the	information	-

r never certify that the information supplied with this hing does not quality for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the informatio 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 eath; 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:

5013476844