

5-5-98 B 6450 C
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FILED
 May 05 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P93000030074 (7)
 1. Corporation Name
 POLO CLUB/CYPRESS ISLE ASSOCIATES, INC.



Principal Place of Business Mailing Address
 300 TORCHWOOD AVENUE 300 TORCHWOOD AVENUE
 PLANTATION FL 33324 PLANTATION FL 33324
 US US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 8231 Muirhead Circ		26 8231 Muirhead Circ		04/23/1993	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	
23 Boynton Beach, FL		28 Boynton Beach, FL		22-3228006	
24 33437		29 33437		Applied For	
25 Palm Beach		30 Palm Beach		Not Applicable	
City & State		City & State		5. Certificate of Status Desired	
23 Boynton Beach, FL		28 Boynton Beach, FL		<input type="checkbox"/> \$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing	
33437		33437		Trust Fund Contribution	
Country		Country		<input type="checkbox"/> \$5.00 May Be Added to Fees	
Palm Beach		Palm Beach		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
KRAUT, WILLIAM				81 Name Alan Pinkwasser, Esq.			
300 TORCHWOOD AVE				82 Street Address (P.O. Box Number is Not Acceptable) 8231 Muirhead Circle			
PLANTATION FL 33324				83			
				84 City Boynton Beach FL 85 Zip Code 33437			

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: *Alan Pinkwasser* DATE: 4/27/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input checked="" type="checkbox"/> DELETE	1.1 TITLE	P <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KRAUT, WILLIAM	1.2 NAME	Mark Fisch
STREET ADDRESS	2145 NE 204TH STREET	1.3 STREET ADDRESS	8231 Muirhead Circle
CITY-ST-ZIP	N MIAMI BEACH FL	1.4 CITY-ST-ZIP	Boynton Beach, FL 33437
TITLE	VP <input type="checkbox"/> DELETE	2.1 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FISCH, ERWIN	2.2 NAME	ERWIN FISCH
STREET ADDRESS	2145 NE 204 STREET	2.3 STREET ADDRESS	8231 Muirhead Circle
CITY-ST-ZIP	N MIAMI BEACH FL	2.4 CITY-ST-ZIP	Boynton Beach, FL 33437
TITLE	ST <input type="checkbox"/> DELETE	3.1 TITLE	ST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WLF, LEONARD	3.2 NAME	Leonard Wlf
STREET ADDRESS	2145 NE 204TH STREET	3.3 STREET ADDRESS	8231 Muirhead Circle
CITY-ST-ZIP	N MIAMI BEACH FL	3.4 CITY-ST-ZIP	Boynton Beach, FL 33437
TITLE	AS <input type="checkbox"/> DELETE	4.1 TITLE	AS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PINKWASSER, ALAN	4.2 NAME	Alan Pinkwasser, Esq.
STREET ADDRESS	2145 NE 204TH STREET	4.3 STREET ADDRESS	8231 Muirhead Circle
CITY-ST-ZIP	N MIAMI BEACH FL	4.4 CITY-ST-ZIP	Boynton Beach, FL 33437
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 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 from an attachment to this address.

SIGNATURE: *Alan Pinkwasser* VP. DATE: 4/27/98 954-471-7758

CR2E034 (10/97)