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 # P93000044235 (8)

1. Corporation Name
PLAZA LA MER, INC.

Principal Place of Business	Mailing Address
~~1160 SOUTH ROGERS CIRCLE~~ BOCA RATON FL 33487	~~P O BOX 3760~~ BOCA RATON FL 33427 US

2. Principal Place of Business 21 6353 W. ROGERS CIRCLE	2a. Mailing Address 26	3. Date Incorporated or Qualified 06/23/1993	3a. Date of Last Report 05/01/1995
Suite, Apt. #, etc. 22 SUITE 1	Suite, Apt. #, etc. 27	4. FEI Number 65-0418058	Applied For Not Applicable
City & State 23 BOCA RATON, FL	City & State 28	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
Zip 24 33487 Country 25 USA	Zip 29 Country 30	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	

9. Name and Address of Current Registered Agent

~~GEISERMAN, ROBERT M~~
~~1160 SOUTH ROGERS CIRCLE~~
~~BOCA RATON FL 33487~~

10. Name and Address of New Registered Agent

81 Name: HARRY HAHAMOVITCH
82 Street Address (P.O. Box Number is Not Acceptable): 6353 W. ROGERS CIRCLE
83: SUITE 1
84 City: BOCA RATON FL 85 Zip Code: 33487

11. Pursuant to the provisions of Section 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: [signature] Signature, typed or printed name of registered agent: HARRY HAHAMOVITCH DATE: 4-22-96

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/P/T/S HAHAMOVITCH, HARRY H ~~1160 S. ROGERS CIRCLE~~ BOCA RATON FL 33487	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	D/P/T/S HARRY HAHAMOVITCH 6353 W. ROGERS CIRCLE #1 BOCA RATON, FL 33487	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~GEISERMAN, ROBERT M~~ ~~1160 S. ROGERS CIRCLE~~ ~~BOCA RATON FL 33487~~	☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (12/95)

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)(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: [signature] 4-22-96 407-994-2233
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
HARRY HAHAMOVITCH, PRESIDENT