FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 22 AM 9:54

DOCUMENT # P93000045782 (8)

1. Corporation Name

TURNBERRY COURT CORPORATION

Principal Place of Business	Mailing Address
19495 BISCAYNE BLVD SUITE 900 NORTH MIAMI BEACH FL 33180	19495 BISCAYNE BLVD SUITE 900 NORTH MIAMI BEACH FL 33180

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/29/1993
3a. Date of Last Report: 05/19/1994

2. Principal Place of Business	2a. Mailing Address
21 2875 N.E. 191st ST.	26 2875 N.E. 191st ST.
Suite, Apt #, etc. 22 400	Suite, Apt #, etc. 27 400
City & State 23 AVENTURA FL.	City & State 28 AVENTURA FL.
Zip 24 33180 Country 25 DADE	Zip 29 33180 Country 30 DADE

4. FEI Number: 65-0452850 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
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

PARELLO, RAYMOND J
19495 BISCAYNE BLVD
SUITE 900
NORTH MIAMI BEACH FL 33180

10. Name and Address of New Registered Agent

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 ______ Signature, typed or printed name of registered agent and title if applicable ______ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☒ Change ☐ Addition
NAME	SOFFER, JEFFREY	12 NAME	
STREET ADDRESS	19495 BISCAYNE BLVD #900	13 STREET ADDRESS	2875 N.E. 191st #400
CITY-ST-ZIP	AVENTURA FL	14 CITY-ST-ZIP	AVENTURA FL. 33180
TITLE	V	21 TITLE	☒ Change ☐ Addition
NAME	SCHWARTZ, JAY	22 NAME	
STREET ADDRESS	19495 BISCAYNE BLVD #900	23 STREET ADDRESS	2875 N.E. 191 st ST #400
CITY-ST-ZIP	AVENTURA FL	24 CITY-ST-ZIP	AVENTURA FL. 33180
TITLE	T	31 TITLE	☒ Change ☐ Addition
NAME	PARELLO, R J	32 NAME	
STREET ADDRESS	19495 BISCAYNE BLVD #900	33 STREET ADDRESS	2875 NE 191 st ST. #400
CITY-ST-ZIP	AVENTURA FL	34 CITY-ST-ZIP	AVENTURA FL. 33180
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with the filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(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 address.

SIGNATURE: [signature] RAY PARELLO 2/13/95 305/937-6200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE

0107350 CP