

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

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**Apr 02 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P93000061351 (1)
1. Corporation Name
GROVE ISLE INVESTMENTS, INC.



Principal Place of Business: **2701 S BAYSHORE DR COCONUT GROVE FL 33133**
Mailing Address: **2701 S BAYSHORE DR COCONUT GROVE FL 33133-5309**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21. State, Apt. #, etc.		26. Suite, Apt. #, etc.		08/27/1993	05/01/1996
22. City & State		27. City & State		4. FEI Number	Applied For
23. Zip		28. Zip		65-0434451	Not Applicable
24. Country		29. Country		5. Certificate of Status Desired	\$8.75 Additional Fee Required
25. Country		30. Country		<input type="checkbox"/>	<input type="checkbox"/>
26. Country		31. Country		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
27. Country		32. Country		<input type="checkbox"/>	<input type="checkbox"/>
28. Country		33. Country		8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
29. Country		34. Country		<input type="checkbox"/>	<input type="checkbox"/>

9. Name and Address of Current Registered Agent
**SCHIFFMAN, ADAM R
2999 NE 191 ST
STE 905
N MIAMI BEACH FL 33180**

10. Name and Address of New Registered Agent
B1 Name: **Lawrence Rothstein**
B2 Street Address (P.O. Box Number is Not Acceptable): **2701 S Bayshore Drive**
B3
B4 City: **Coconut Grove** FL B5 Zip Code: **33133**

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 and familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* **Lawrence Rothstein** DATE: **3/14/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WIENER, MAURICE	1.2 NAME	
STREET ADDRESS	2701 S BAYSHORE DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	COCONUT GROVE FL 33133	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROTHSTEIN, LAWRENCE	2.2 NAME	
STREET ADDRESS	2701 S BAYSHORE DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	COCONUT GROVE FL 33133	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAY, LEE	3.2 NAME	
STREET ADDRESS	2701 S BAYSHORE DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	COCONUT GROVE FL 33133	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: *[Signature]* **Lawrence Rothstein** DATE: **3/12/97** PHONE: **(305) 854-6802**

CR2E034 (9/96)