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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000072350 (0)

GOLDMARK DEVELOPMENT, INC.

Principal Place of Business	Mailing Addres
999 WASHINGTON AVENUE MIAMI BEACH FL 33139	999 Washing Miami Beach

FILED Apr 09 1998 8:00am Secretary of State



TON AVENUE FL 33139 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/19/1993 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 65-0445549 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GALBUT, ABRAHAM A 999 WASHINGTON AVENUE Street Address (P.O. Box Number is Not Acceptable) MIAM! BEACH FL 33139 83 City 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 (NO16: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change TITLE CHAFETZ, EILEEN NAME 1.2 NAME 999 WASHINGTON AVENUE 1.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change 2.1 TITLE Addition CHAFETZ, MARK NAME 2.2 NAME 999 WASHINGTON AVENUE STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Channe Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-2IP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

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 for on an attachment with an address.

SIGNATURE:

3/3/98 (305)672-3/00

SIGNATURE:

CITY-ST-ZIP

3/31/98

(305)672-3100