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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 24 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000012884 (0) HOLLYWOOD PARK, INC.						
Principal Place of Business Mailing Address					-	)
13205 KEYSTONE TERRACE 13205 KEYSTONE TERRACE N MIAMI FL 33181 N JAHAMI FL 33181						
		HOLLYWOO	D PARK INC.		DO NOT WRITE IN THIS	SPACE
•		C/O MAJESTIC FLOO		rs inc.	3. Date Incorporated or Qualified	
2960 PERSHING			NG STREET		02/14/1994	<del></del>
2. Principal Place of Business 2a. Mailin 10111100		D, PL 83020		4. FEI Number	Applied For Not Applicable	
21   26     Suite, Apt. #, etc.   Suite, Apt. #, etc.					65-0448545	\$8.75 Additional
22					5. Certificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution Added to Fees		
Zip	Country	Zıp	Country		8. This corporation owes or has paid the cu	urrent year Intangible
24	25	29	30	_	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered	Agent
MA	NDEL, MARVIN		1 18	lame		
13205 KEYSTONE TERRACE				Street Addre	ess (P.O. Box Number is Not Acceptable)	
N MIAMI FL 33181						
			83			
			1 1	City	FI	85 Zip Code
11. Pursuant office or ragent. La	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the oblig	2 and 607.1508, Florida Statu of Florida. Such change was alions of, Section 607.0505, F	ites, the above-n authorized by th lorida Statutes.	amed corp e corporati	oration submits this statement for the purpose of ion's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE	Stanature, typed or printed name of registered age	cut and site if applicable ANC	TE: Registered Agent s	innat na raa der	red when reinstating) DATE	
12.		D DIRECTORS	13,	ignature raduire	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE			1.1 TITLE		, , , , , , , , , , , , , , , , , , ,	☐ Change ☐ Addition
NAME			1.2 NAME			
STREET ADDRESS	ACAT MANO CONTROL		1.3 STREET ADI	DRESS		
CITY-ST-ZIP	DAM HADDON IN ANIDO PLANARA		1.4 City-St-Z	IP		
TITLE			2.1 TITLE			Change Addition
NAME	MANDEL, MARVIN 23		2.2 NAME			
STREET ADDRESS	DRESS 13205 KEYSTONE TERRACE 23			DRESS		ļ
CITY-ST-ZIP	N MIAMI FL 33181		2. 4 CITY - ST - 2	2IP	<u> </u>	
TITLE	VD DELETE 3.1		3.1 TITLE			Change Addition
NAME	Bieler, arthur		3.2 NAME			
STREET ADDRESS	3000 ISLAND BLVD #1003		3.3 STREET ADI	DRESS		
CITY-ST-ZIP	N MIAMI BEACH FL 33160		3.4. CITY - ST - 2	IP		
TITLE	VD	☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	BIELER, BERNARD		4. 2 NAME			
STREET ADDRESS			4.3 STREET ADI	DRES\$		
CITY-ST-ZIP			4.4 CITY-ST-Z	IP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADI	- 1		
CITY-ST-ZIP		DEFETE	5.4 CITY-ST-Z	IP —		Change   Addition
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME	,proc		:
STREET ADDRESS			6.3 STREET ADD	JBESS T		

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, or on an attachment with an address.

Marvin Mandel, Pres. 3/16/98 954 922-8500