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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 24 1998 8:00am Secretary of State

DOCUI	MENT # P94000	059621 (0)			
	HOMES AT THE GROVE, IN	• •			
, 552					
Principal Place	e of Business	Mailing Address			
7200 W. CAM	IINO REAL	7200 W. CAMINO REAL			
SUITE 104 SUITE 104 SUITE 104 BOCA RATON FL 33433 BOCA RATON FL 33433				DO NOT WRITE IN THIS	SPACE
BUCA KATON	I FL 33433	BOCA RATON FL 33433		3. Date Incorporated or Qualified	, or Mot
				08/12/1994	
2. Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 797	18 Laina Lone	26 OM. Aude	r	65-0520371	Not Applicable
Suite, Apt.	#, etc. 3	Suite, Apt #, etc.	1.2.0.	5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		Cily & State	state or	6. Election Campaign Financing	\$5.00 May Be
23 B DV		28 Boca, Rato	n. FL	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	
24 334			30 USA		Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	d Agent
	DER, MICHAEL &		81 Name		
7200 W. CAMINO REAL			82 Street Ac	dress (P.O. Box Number is Not Acceptable)	
SUITE 104			83	14 Twin take Dr.	
ВО	CA RATON FL 33433				
			84 City	a Patan Fi	85 Zip Code
11. Pursuant	to the provisions of Socions 607.0502	and 607.1508, Florida Statutes	s, the above named or	proporation submits this statement for the purpose	of changing its registered
office or re agent. I a	egistered agent, or ooth, // the State of m familiar with, and accept the obligat	of Florida. Such change was au tions of, Section 607.0505, Flor	ithorized by the corpo ida Statutes.	proporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE				4/30/98	
	Signature, typod or printed name of registered agent		Registered Agent signature re-		ID DIRECTORS IN 10
12.	OFFICERS AND	DIRECTORS	13.	quied when reinstating) ADDITIONS/CHANGES TO OFFICERS AN	
	OFFICERS AND			ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12 Change Addition
12.	OFFICERS AND D PUDER, MICHAEL S	DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	
12. TITLE NAME	OFFICERS AND	DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS AN	
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14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the information indicated on this annual report or supplemental annual effort 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 of true 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.