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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P94000073414 (2)

DOCUMENT #

1. Corporation Name SYMPHONY BEACH CLUB, INC.



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453 SOUTH ATLANTIC AVE. 453 SOUTH ATLANTIC AVE. ORMOND BEACH FL 32176					i					
ORMOND BEACH FL 32176			OHMOND BEACH PL 32176				3. Date incorporated or Qualified 10/06/1994	3a. Date o	of Last Re 5/01/1	
		- 1	Maiso Add				4. FEI Number			Applied For
Principal Place	of Business	2a. 26	Maising Add	11055			59-3280623			Not Applicable
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Suite, Apt. #, 6	BtC.	27	CG 1.5.1 1 4 1.	.,			5. Certificate of Status Desired	<u>.</u>	Fee	Required
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	9. Name and Address of Currer	nt Regis	stered Agen	<u> </u>	81	Name	TO. Mario Programme and Progra			
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453 SO	UTH ATLANTIC AVE.				83					
ORMON	D BEACH FL 32176				L				85 Z	ıp Code
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I do hereby certify that the information supplied with this filing is voluntarily form-shed and does not quary in the extent property of the extent of the same fegal effect as if made unde 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 fegal effect as if made unde certify 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 chargest or an attachment with an address.

\*\*Comparison of the execute the information supplied with the same fegal effect as if made unde certify that the information supplied with the same fegal effect as if made unde certify that the information indicated on this samuel report of the execute and that my signature shall have the same fegal effect as if made unde certify that the information indicated on this annual report of the execute and accurate and that my signature shall have the same fegal effect as if made unde certify that the information indicated on this annual report of the execute and accurate and that my signature shall have the same fegal effect as if made unde certify that the information indicated on the same fegal effect as if made under the execute and that my signature shall have the same fegal effect as if made under the execute and that my signature shall have the same fegal effect as if made under the execute in the execute and that my signature shall have the same fegal effect as if made under the execute and that my signature shall have the same fegal effect as if made under the execute and that my signature shall have the same fegal effect as if made under the execute and the execute

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od to execute this report as required by Chapter 607, Florida Statues, and una V-Pru 8

3/25/96 672-7373

Digital Property