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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9400084428 (9)

PARADISE BEACH HOTEL AND CLUB, INC.

Principal Place of Business Mailing Address 4950 NORTH DIXIE HWY 4950 NORTH DIXIE HWY FORT LAUDERDALE FL 33334 FORT LAUDERDALE FL 33334-3947 3. Date Incorporated or Qualified 3a. Date of Last Report 03/21/1996 11/18/1994 2. Principal Place of Business 4. FEI Number Applied For 2a. Mailing Address 65-0548449 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country 710 Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KENNELLY, JOHN S 4950 NORTH DIXIE HWY. Street Address (P.O. Box Number is Not Acceptable) SUITE A 83 FORT LAUDERDALE FL 33334 84 City Zip Code 85 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. 13. Change Addition TITLE DELETE 1.1 TITLE KENNELLY, JOHN B NAME 1.2 NAME **CR2E034** 333 KEY PALM RD. 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33432** CiTY - S1 - ZiP 1.4 CITY-ST-ZIP Addition DELETE Change 2.1 TITLE TITLE CHANEY, MARVIN T 22 NAME NAME 4950 N. DIXIE HWY STREET ADDRESS 2 3 STREET ADDRESS FT. LAUDERDALR FL 33334 CITY-ST-2IF 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TIPLE KENNELLY, JOHN S 3.2 NAME NAME 4950 N. DIXIE HWY STREET ADDRESS 3.3 STREET ADDRESS FT. LAUDERDALR FL 33334 CITY - ST - ZIF 3.4. CITY-ST-ZIP DELETE Addition Change 4.1 TITLE TITLE NAME **4.2 NAME** 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE THLE 52 NAME NAME STHEET ADDRESS **5.3 STREET ADDRESS** 5.4 CITY-ST-ZIP CHTY-ST-ZIP DELETE Addition Change THLE 6.1 TrTLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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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 to 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.

FILED
May 12 1997 8:00am
Secretary of State

H-29-97