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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandie B. Birdman
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 29, 1996 08:00 AM
Secretary of State

DOCUMENT # **P95000028664 (7)**

1. Corporation Name

COLONY PLAZA DEVELOPMENT, INC.



Principal Place of Business

**307 S 21ST AVE
HOLLYWOOD FL 33020**

Mailing Address

**P O BOX 8020
HALLANDALE FL 33008**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

9. Name and Address of Current Registered Agent

**KORN, GARY A
20803 BISCAYNE BLVD.
SUITE 200
AVENTURA FL 33180**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0607 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 607.0607, Florida Statutes.

SIGNATURE

Signature of Officer or Director

Signature of Agent

Date

12. OFFICERS AND DIRECTORS

TITLE

**DP
HIRSCH, HERBERT
307 S 21ST AVE
HOLLYWOOD FL 33020**

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

**DV
BIRDMAN, HARVEY
307 S 21ST AVE
HOLLYWOOD FL 33020**

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

**DV
BIRDMAN, DIANE
307 S 21ST AVE
HOLLYWOOD FL 33020**

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

**DV
BIRDMAN, LOUIS
307 S 21ST AVE
HOLLYWOOD FL 33020**

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

**DV
BIRDMAN, LOUIS
307 S 21ST AVE
HOLLYWOOD FL 33020**

☐ DELETE

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HOLLYWOOD FL 33020**

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-STATE-ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY-STATE-ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or liquidator to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if change. I am attaching with an address:

SIGNATURE:

Diane Birdman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/96

954-922-6070

CR2E034 (12/95)