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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000044712 (4)

WILTON MANORS HOLDINGS, CORP.

APPROVED AND FILED

97 MAY -1 AM 6: 56

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Plac	e of Business	Mailing Address								
2300 CORAL WAY MIAMI FL 33145		2300 CORAL WAY MIAMI FL 33145-3511				!				
							Incorporated or Qualified 9/1995		ate of Last R /01/1996	eport
	Place of Business	2a. Mailing Address				4. FEI N			Ar	plied For
21 2300 CORAL WAY		26 2300 CORAL WAY							t Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.			5. Certif	icate of Status Desired	K	\$8.75 /	Additional equired	
22 SUITE # 200 City & State		27 SUTTE # 200 City & State								<u> </u>
23 MIAMI FLORIDA		28MIAMI FLORIDA					on Campaign Financing Fund Contribution		\$5.00 Added	
Zip Country		Zip Country			***	·	corporation has liability to			
24 33145	25 US	29 33145	30 US	<u>. </u>					□ No	
	9. Name and Address of Current	Registered Agent				10. Nam	and Address of New R	legistered	Agent	
FLORIDA ANNUAL REPORT SERVICE, INC.				81 1	Name					
	O CORAL WAY	82 Street Ad			Street Addre	idress (P.O. Box Number is Not Acceptable)				
	TE 200		83							
MIA	MI FL 33145						٠			
				84 (City			Fl	85 Zip	Code
44 D	1 110 00 00 00 00 00 00 00 00 00 00 00 0	and eff. 1609 Stuide State	utan tha a	<u> </u>	amad aaraa	ration sub-	nite this etatement for the	FL	al chancina i	te registered
office or r	to the provisions of Bectons 60) 6602 regintered agent or polh, in the Biote c am Limiliar virty and secept the or had	of Florida, Such change was	authorize	d by th	ne corporatio	n's board	of directors. I hereby acc	ept the ap	pointment as	registered
	am lamiliar vijty and accept the chipa	ions of, Section 607.0505, F	Florida Stal AM	lutes. Ana	CANTER	A TODE	7 DDDC	4/2	1776)
SIGNATURE	J. J	appointe if applicable. / (NC			signature required			DATE	//_	
12.	OFFICERS AND		13.	o Algeira	a Bratoie iedane.		IONS/CHANGES TO OFF		D DIRECTOR	RS IN 12
THEF	PST	DELETE	1.1 TI	TLE				7	Change	Addition
NAME	LOPEZ CANTERA, AMADA		1.2 N	AME .			1000023	164	701	0
STREET ADDRESS	2300 CORAL WAY SUITE 201		1.3 \$1	TREET AD	Dress (100002	797C	11460	023
CITY-SI-ZIF	MIAMI FL 33145		1.4 D	TY-ST-	ZIP		****16	35.00	****	35.00
THLE	D	☐ DELETE	2.1 TI	TLE					Change	☐ Addition
NAME	Berg, Katharina		2.2 N	AME			10000023			(J
STREET ADDRESS	2300 CORAL WAY SUITE 201		2.3 \$	TREET AD	DRESS				}611(****	
CITY - S1 - 7(P	MIAMI FL 33145		2.40	HY-ST-	ZiP		******	(). (S	****	FO. 13
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NAME			3.2 N	AME	1					
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NAME			4.2 N		.,					
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City - S1 - ZiP		Driver		ITY-ST-	ZIP				Observe	1 A 4 4 9 1 -
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NAME			5.2 N			\mathcal{A} .				
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NAME	1		62N							
STREET ADDRESS				TREET AD						
CHY-S1-20			6.4 C	ITY-ST-	ZIP					

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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I arri 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 of Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ACLASTA TO PEZ CIANTERA PRES.

858-4550

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