

APPROVED  
AND  
FILED

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**,  
Secretary of State  
DIVISION OF CORPORATIONS

1. Corporation Name  
**TAHITI BEACH CLUB, INC.**

Principal Place of Business	Mailing Address
16901 COLLINS AVENUE NORTH MIAMI BEACH FL 33160 US	16901 COLLINS AVENUE NORTH MIAMI BEACH FL 33160 US

DO NOT WRITE IN THIS SPACE

				3. Date Incorporated or Qualified <b>06/12/1995</b>		3a. Date of Last Report <b>03/12/1996</b>	
2. Principal Place of Business			2a. Mailing Address			4. FEI Number <b>65-0585936</b>	
21 Suite, Apt. #, etc.			26 Suite, Apt. #, etc.			Applied For Not Applicable	
22 City & State			27 City & State			5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
23 Zip			28 Zip			6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
24 Country			29 Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ILTER, ODALYS J 3320 PADDOCK ROAD FT. LAUDERDALE FL 33331		81	Name MARK A. MARDER
		82	Street Address (P.O. Box Number is Not Acceptable) 9400 DADELAND TOWERS -
		83	9400 SOUTH DADELAND BOULEVARD
		84	City MIAMI
			Zip Code FL 33156

SIGNATURE JOEL CULLEY [Signature] September 25, 1997  
Signature, typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12.		OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOUCHACOURT, GILLES 12220 N.W. 8TH ST. PLANTATION FL 33325	<input checked="" type="checkbox"/> DELETE		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PD. LEONARD DE TULLIO 16.465 NE 32nd AV. N-MIAM BCH FL 33160	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ILTER, JOHN A 3320 PADDOCK ROAD FT. LAUDERDALE FL 33331	<input checked="" type="checkbox"/> DELETE		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	VD. JOEL GILLET 3160 NE 165th. Street N.MIAMI BCH FL 33160	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ILTER, MEHMET 3320 PADDOCK ROAD FT. LAUDERDALE FL	<input checked="" type="checkbox"/> DELETE		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<del>N.MIAMI BCH FL 33160</del> <del>-10/01/97--01087--01</del> <del>****550.00 ****550.00</del>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	600002309016-142 -10/01/97--01087--017 ****550.00 ****550.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	A. alan 9/29/97	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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.

CR2E034 (4/97)