

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000059826 (4)

1. Corporation Name

HAMLET DEVELOPMENT COMPANY # 8



Principal Place of Business

15321 S DIXIE HWY. SUITE 201  
MIAMI FL 33157

Mailing Address

15321 S DIXIE HWY. SUITE 201  
MIAMI FL 33157

3. Date Incorporated or Qualified

07/31/1995

3a. Date of Last Report

4. FEI Number

65-0595849

Applied For

Not Applicable

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

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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 607.0502 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

Signature, typed or printed name of registered agent and the corporation

NOTE: Registered Agent Signature Required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	JOSEPH, JERRY L.	15321 S DIXIE HIGHWAY, SUITE 201	MIAMI, FL 33157	<input type="checkbox"/>
UTA	ROYO, EMILIO	15321 S DIXIE HIGHWAY, SUITE 201	MIAMI, FL 33157	<input type="checkbox"/>
S	LEVINE, ADEL	15321 S DIXIE HIGHWAY, SUITE 201	MIAMI, FL 33157	<input type="checkbox"/>
D	GOODPASTER, CHARLES A.	15321 S DIXIE HIGHWAY, SUITE 201	MIAMI, FL 33157	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-ST-ZIP	5. DELETE
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
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				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

SIGNATURE: JERRY L. JOSEPH

SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

CR2E034 (12/95)