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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000079358 (4)

POLO TRACE MANAGEMENT, INC.

Principal Place of Business 13397 HAGEN RANCH ROAD DELRAY BEACH FL 33446

2. Principal Place of Business 21 /348/ Polo TRACE

Suite, Apt. #, etc.

City & State

Mailing Address

13397 HAGEN RANCH ROAD DELRAY BEACH FL 33446

2a. Mailing Address
26 13481 POLO TRACE

Suite, Apt. #, etc.

City & State

FILED Jan 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

561-495-5300

3. Date incorporated or Qualified

10/16/1995 4. FEI Number

65-0616868

5. Certificate of Status Desired

6. Election Campaign Financing

23]			[28]	<u>-</u>			Trust Puna Contribu		Adde	d to rees
Zip		Country	Zip	ç	ountry	' ''	8. This corporation ow	es or has paid the c		Intangible
24		25	29	30			Personal Property T		Yes	□ No
	9. Name	and Address of Current	Registered Agent	·	81		10. Name and Address	of New Registere	d Agent	
GRANET, LLOYD ESQ.						Name				
5200 TOWN CENTER CIRCLE						Street Add	ress (P.O. Box Number is A	lot Acceptable)		
SUITE 301										
BOCA RATON FL 33486					83		,			
					84	City			85 Zi	p Code
					. []	Oity		F	L ³³ -	p obdo
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 register 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										
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										
SIGNATORE	Signature, typed	or printed name of registered agent	and title if applicable.	(NOTE, Regist	ered Age	nt signature requi	red when reinstating)	. DATE		
12.		OFFICERS AND		1:	3.		ADDITIONS/CHANGE	S TO OFFICERS AN		
TITLE	DP		DE	LETE 1,1	TITLE				Change	Addition
NAME	GRAFFE	O, JOSEPH		1.2	NAME	İ				
STREET ADDRESS	13397 HAGEN RANCH RD			1.3	1.3 STREET ADDRESS					
CITY - ST - ZIP	DELRAY	BEACH FL 33446			CITY-S	T-ZIP				
TITLE	DVPT		☐ DE	LETE 2.1	TITLE				Change	Addition
NAME	GALANT	e, Joseph		2.2	LNAME	(
STREET ADDRESS	13397 H	AGEN RANCH ROAD		2.3	STREET	ADDRESS				
CITY-ST-ZIP	DELRAY	BEACH FL 33446		2.	ÉCITY-S	T-ZIP				
TITLE	DVP		☐ DEI	LETE 3,1	TITLE				Change	Addition
NAME	INELLI, A	INDREW		3.2	NAME					
STREET ADDRESS	13397 HAGEN RANCH ROAD			3.3	3.3 STREET ADDRESS					
CITY-ST-ZIP	DELRAY	BEACH FL 33446		3.4	. cny-s	T-ZIP				
TITLE	DVAS		☐ DEI	ETE 4.1	TITLE				Change	Addition
NAME	ROSTOF	F, HARRIETT		4. :	2 NAME	Ì				II.
STREET ADDRESS	13397 H	AGEN RANCH ROAD		4.3	ŞTREET.	ADDRESS				i
CITY-ST-ZIP	DELRAY	BEACH FL 33446		4.4	: CITY-S1	r- ZIP				
TITLE			DEI	.ETE 5.1	TITLE				Change	Addition
NAME				5.2	NAME					
STREET ADDRESS				5.3	STREET	ADORESS				
CITY-ST-ZIP				5.4	CITY-S1	r- ZIP				
TITLE		,	☐ DEL	ETE 6.1	TITLE				Change	Addition
NAME				6.2	NAME					
STREET ADDRESS				6.3	STREET .	ADDRESS				ĺ
CITY-ST-ZIP				5 ···	CITY-ST					}
	ertify that the	information supplied with	this filing does not d				Section 119.07(3)(i), Florida re shall have the same lega	a Statutes. I further o	ertify that th	e information
indicated officer or	on this annua director of the	al report or supplemental a corporation or the receiv	annual report is true : rer or trustee empow	and accurate a ered to execute	ind tha e this r	it my signatu eport as regi	re shall have the same lega uired by Chapter 607, Florid	ıl effect as if made u la Statutes; and that	inder oath; t my name a	nat I am an