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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600032194

1. Corporation Name

RENAISSANCE ON THE OCEAN, INC.

Principal Place of Business Mailing Address							.15 88188 91161 88188 71	18 19111 9191 1941
% HOLLYWOOD OAKS DEVELOPERS		% HOLLYWOOD OAKS DEVELOPERS						
••••		5675 S.W. 35TH AVENUE			DO NOT WRITE IN THIS SPACE			
FT. LAUDERDALE FL 33312 FT. LAUDE		FT. LAUDERDALE FL 33312	UDERDALE FL 33312		3. Date Incorporated or Qualifed			
						04/12/1996		İ
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				65-0671716	1	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	•	Additional
22		27			3. Certificate of Status Desired	Fee F	Required	
City & State	e	City & State			-	6. Election Campaign Financing	* *	0 Мау Ве
28			<u> </u>			Trust Fund Contribution	Added	to Fees
			Country			8. This corporation owes the current y	rear Intangible ☐ Yes	□No
24	25	29 30	L			Personal Property Tax. 10. Name and Address of New Regis		
	9. Name and Address of Current	Registered Agent	81	Nam	<u>е</u>	to, Name and Address of New Negra	naroa Agon	
DECKELBAUM, GORDON				l				
	S.W. 35TH AVENUE		82 Street Addre			ess (P.O. Box Number is Not Acceptable)		
	LAUDERDALE FL 33312		83			17		
			84	City			FL 85 Zir	Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes,	the abov	e-name	d corpo	pration submits this statement for the purp	ose of changing i	ts registered
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was autho	onzed by	the co	poratio	n's board of directors. I hereby accept the	appointment as	registerea
ŭ	tti laililliai willi, and accept the obligat	10113 01, 00011011 001 10000, 7 101100	J.	••				
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE: Reg	istered Age	nt signatu	e required		ATE	
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICE		
TITLE	D	☐ DELETE 1.1 TIT					Change	e
NAME	DECKELBAUM, GORDON		1.2 NAME					
STREET ADDRESS	5010 U.W. GOTT MENGE		1.3 STREET ADDRESS		s			
CITY-ST-ZIP	11: 21002:10:12		1.4 CiTY-ST-ZiP				☐ Change	e Addition
TITLE	_		2.1 TITLE				Containge	, LI Madillott
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE		is		·	
CITY-ST-ZIP			2.4 CITY-1	SI-ZIP			—— — — Chang	a Addition:
TITLE .			3.2 NAME					_
NAME			3.3 STREE	T ANDRES	20			
STREET ADDRESS			3.4. CITY-		~			
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	31-211			☐ Change	e Addition
NAME		_	4. 2 NAME					
STREET ADDRESS			4.3 STREE		ss			
CITY-ST-ZIP		•	4.4 CITY-S					
TITLE		☐ DELETE	51 TITLE				☐ Change	e Addition
NAME			5.2 NAME			* yu. ,		
STREET ADDRESS			5.3 STREE	TADDRE	ss			
CITY-ST-ZIP			54 CITY-8	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE				☐ Chang	e
	1				1			3

CITY-ST-ZIP 14. I 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS