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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000049936 (3)

HARBOR ISLAND PARTNERS, INC.

FILED Apr 21 1997 8:00am Secretary of State



rates page 1 reco	e of Business	Mailing Address				1 10011001 110 10119 011		*****	*140 /6/44 /1	
1900 LARRY PA WORTH BAY V MIAMI FL 3314	ILLAGE	7900 LARRY PASKO NORTH BAY VILLAG MIAMI FL 33141-330	SE .							
						3. Date Incorporated 06/10/1996	or Qualified	3a. Dat	N)A	
2. Principal P	Place of Business DRIVE	2a. Mailing Addres	EAST	Dec	UE	4. FEI Number 65 - 66	7269-	7	⊢ —+-	Applied For Not Applicabl
Suite Apt.	# etc	Suite, Apt. #, e'	l¢.			5. Certificate of Statu	s Desired			Additional Required
City & Stat	BMY VILLAGE, FA	28 CIV 02T	H BAY	VIU	AGE F	6. Election Campaign Trust Fund Contrib	-			May Be
3314	Country A	20 33141	30	Suntry S	SA	This corporation has Florida Statutes		ntangible t		s. 199.032,
	9. Name and Address of Curre	nt Registered Agent		1		10. Name and Addres	ss of New Reg	Istered A	gent	
FIEL	LDSTONE, RONALD R			61 Na	me					
200 S. BISCAYNE BOULEVARD SUITE 2100				82 St	eet Address (P.O. Box Number is Not Acceptable)					
	MI FL 33131			83						
				84 Ci	v				85 Zip	Code
	to the provisions of Sections 607.050 registered agent, or both in the State am familiar with, and accept the oblig				•		······································	<u>FL</u>		
GNATURE										
2.	Signarize Typed or proted name of registered ag OFFICERS AN	est and tilloif applicable ID DIRECTORS	(NOTE Register		nature required	d when reinstating) ADDITIONS/CHANG	SES TO OFFIC	DATE ERS AND	DIRECTO	ORS IN 12
			13		nature required		SES TO OFFIC	ERS AND	DIRECTO Change	
ų į	OFFICERS AND PASKOW, ROSALEE	ID DIRECTORS	13 TE 1.5).		ADDITIONS/CHANG		ERS AND		
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. I do hereby certify that the information supplied with this filing does not quality 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 of 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 this god or on an attachment with an address.

SIGNATURE:

TURE AND TYPEO OF PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

PASKOW

2/25/97 3057519600