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FILED  
Apr 23 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000085513 (5)

1. Corporation Name

KINGS RIDGE GOLF CORPORATION

Principal Place of Business

700 N.W. 107 AVENUE  
MIAMI FL 33172

Mailing Address

700 N.W. 107 AVENUE  
MIAMI FL 33172-3161

3. Date Incorporated or Qualified  
10/16/1996

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FET Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WATSKY, MORRIS J ESQ.  
700 N.W. 107 AVENUE  
MIAMI FL 33172

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	MILLER, LEONARD	
STREET ADDRESS	700 N.W. 107 AVENUE	
CITY-ST-ZIP	MIAMI FL 33172	

TITLE	D	<input type="checkbox"/> DELETE
NAME	BOLOTIN, IRVING	
STREET ADDRESS	700 N.W. 107 AVENUE	
CITY-ST-ZIP	MIAMI FL 33172	

TITLE	D	<input type="checkbox"/> DELETE
NAME	COLE, ROBERT B	
STREET ADDRESS	700 N.W. 107 AVENUE	
CITY-ST-ZIP	MIAMI FL 33172	

TITLE	D	<input type="checkbox"/> DELETE
NAME	PEKOR, ALLAN J	
STREET ADDRESS	700 N.W. 107 AVENUE	
CITY-ST-ZIP	MIAMI FL 33172	

TITLE	D	<input type="checkbox"/> DELETE
NAME	MILLER, STUART A	
STREET ADDRESS	700 N.W. 107 AVENUE	
CITY-ST-ZIP	MIAMI FL 33172	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☒ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

AS  
Santaella, Grace  
700 N.W. 107 AVE.  
MIAMI, FL 33172

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.

SIGNATURE:

Grace Santaella

Grace Santaella 1-13-97 (305) 229-6400

CR2E034 (9/96)