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 # P97000023524 (6)

CORALINA DEVELOPMENT CORP.

Principal Place of Business	Mailing Address		
277 SE 5TH AVE DELRAY BEACH FL 33483	277 SE 5TH AVE DELRAY BEACH FL 33483		
2. Principal Place of Business	2a. Mailing Address		

FILED Feb 04 1998 8:00am Secretary of State

Principal Place of Business Mailing Address							10 11011 4101 1001			
277 SE 5TH AVE DELRAY BEACH FL 33483 277 SE 5TH AVE DELRAY BEACH FL 33483			13			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified				
2. Principal Place of Business 2a. Mailing Address			· -· ·			03/10/1997 4. FEI Number		Applied For		
21		26				65-0745098		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.7	5 Additional		
22		27		5. Certificate of Status Desired	Fee	e Required				
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution		00 May Be				
Zip	Country	Zip	Cou	ntry	····	Traditional Continuous		led to Fees		
24	25	29	30			8. This corporation owes or has paid the currept year Intangible Personal Property Tax due June 30. Yes No				
	9. Name and Address of Current		L			10. Name and Address of New Registers	ed Agent			
GLICKSTEIN, GREGG H					81 Name					
54 SW BOCA RATON BLVD				62	Street Addre	ss (P.O. Box Number is Not Acceptable)				
BOCA RATON FL 33432			_							
				83						
			İ	84	City	F	85 2	Zip Code		
11. Pursuant	to the previsions of Sections 607.0502	and 607.1508. Florida Statul	es the ab	OVA:	-named coroo	ration submits this statement for the purpose	of changin	na its registered		
Office or re	egistered agent, or both, in the State of military with, and accept the obligations.	of Florida. Such change was a	authorized	∄bν.	the corporatio	on's board of directors. I hereby accept the a	ppointment	as registered		
•	in lamiai win, and accept the obligat	rons or, section 607.0005, Fit	Jiloa Siai	utes.						
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOT	E: Reg-stered	I Agen	nt signature required	d when reinstating) DATE	- 			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE				Chan	ge 🔲 Addition		
NAME	GLICKSTEIN, CARY D		ME							
STREET ADDRESS	9.1 1.11.1,1-		REET A	NODRESS						
CITY-ST-ZIP	DELRAY BEACH FL 33483	Decemen	1.4 CITY - S		- ZIP					
TOLE		☐ DELETE	2.1 TITLE				☐ Chang	ge L_J Addition		
NAME REPORTED ADDRESS	2.2 N									
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE		DELETE	2. 4 CI 3.1 TIT		1-214		☐ Chang	ge Addition		
NAME			3.2 NA		-		LI Origin	Jo C. J. Addreidit		
STREET ADORESS					ADDRESS					
CITY-ST-ZIP			3 4. Ci							
TITLE		☐ DELE te	4.1 TIT				Chang	ge 🔲 Addition		
NAME			4. 2 N/	ME						
STREET ADDRESS			4.3 \$11	A T33F	DDRESS					
CITY-ST-ZIP			4.4 CIT	Y-ST-	· ZIP					
TITLE		☐ DELETE	5.1 TiT				Chang	ge 🔲 Addition		
NAME			5.2 NA							
STREET ADDRESS					DDRESS					
CITY-ST-ZIP		DELETE	5 4 CI1		- ZIP		TT Chro	no Addition		
TITLE		T3 nereie	6.1 TIT				L Chang	ge L Addition		
NAME STOCET ANABESS			6.2 NAI		pparec					
STREET ADORESS					DDRESS					
CITY-ST-ZIP	- 		6.4 CIT	1-51-	· Cir					

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 resolver 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.