

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

**FILED**

**May 06 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P97000080592**  
1. Corporation Name  
**GREENVIEW MANAGEMENT CORPORATION**

Principal Place of Business <b>2500 Hollywood, Blvd. Suite #212 Hollywood, Fl. 33020</b>	Mailing Address <b>2500 Hollywood, Blvd. Suite #212 Hollywood, FL. 33020</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 <b>2500 Hollywood Blvd.</b> Suite, Apt #, etc.	26 <b>2500 Hollywood Blvd-</b> Suite, Apt #, etc.
22 <b>Suite #212</b> City & State	27 <b>Suite #212</b> City & State
23 <b>Hollywood, Fl.</b> Zip	28 <b>Hollywood, FL.</b> Zip
24 <b>33020</b> Country	29 <b>33020</b> Country
25 <b>Broward</b>	30 <b>Broward</b>

3. Date Incorporated or Qualified  
**September 17, 1997**

4. FEI Number  
**Applied for** 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 owes or has paid the current year intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

81 Name	<b>ROSS H. MANELLA Esq.</b>
82 Street Address (P.O. Box Number is Not Acceptable)	<b>2500 Hollywood Blvd.</b>
83	<b>Suite #212</b>
84 City	<b>Hollywood</b>
85 Zip Code	<b>FL 33020</b>

10. Name and Address of New Registered Agent

81 Name	<b>ROSS H. MANELLA Esq.</b>
82 Street Address (P.O. Box Number is Not Acceptable)	<b>2500 Hollywood Blvd.</b>
83	<b>Suite #212</b>
84 City	<b>Hollywood</b>
85 Zip Code	<b>FL 33020</b>

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 \_\_\_\_\_ (NOTE: Registered Agent Signature required when re-issuing) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>p/s/t</b> <input type="checkbox"/> DELETE
NAME	<b>Ellner, Marcus</b>
STREET ADDRESS	<b>20185 E. Country Club Drive TS6</b>
CITY-ST-ZIP	<b>N. Miami Beach, FL. 33180</b>
TITLE	<b>v.p.</b> <input type="checkbox"/> DELETE
NAME	<b>Ellner, David</b>
STREET ADDRESS	<b>20185 E. Country Club Drive TS6</b>
CITY-ST-ZIP	<b>North Miami Beach, FL. 33180</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	<b>800002516898</b>
63 STREET ADDRESS	<b>-05/08/98--01051--017</b>
64 CITY-ST-ZIP	<b>***150.00</b>

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.

SIGNATURE: *Marcus Ellner* **MARCUS ELLNER** 4/30/98 (954) 925-3355

CR2E034 (10/97)