

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

FILED
Apr 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **P97000083787 (6)**

1. Corporation Name
THE MERCURY RESORTS, INC.

Principal Place of Business
**307 S. 21ST ST.
HOLLYWOOD FL 33020**

Mailing Address
**307 S. 21ST ST.
HOLLYWOOD FL 33020**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/26/1997	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0784111	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**KORN, GARY A
20803 BISCAYNE BLVD., STE. 200
AVENTURA FL 33180**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST	1.1 TITLE	VD
NAME	BIRDMAN, HARVEY	1.2 NAME	
STREET ADDRESS	307 S. 21ST ST.	1.3 STREET ADDRESS	307 SOUTH 21ST AVENUE
CITY-ST-ZIP	HOLLYWOOD FL 33020	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	PD
NAME		2.2 NAME	GRABARNICK, GENE
STREET ADDRESS		2.3 STREET ADDRESS	307 SOUTH 21ST AVENUE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE		3.1 TITLE	VD
NAME		3.2 NAME	HIRSCH, HERBERT
STREET ADDRESS		3.3 STREET ADDRESS	307 SOUTH 21ST AVENUE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE		4.1 TITLE	VD
NAME		4.2 NAME	MOLKO, RONALD
STREET ADDRESS		4.3 STREET ADDRESS	307 SOUTH 21ST AVENUE
CITY-ST-ZIP		4.4 CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE		5.1 TITLE	VSD
NAME		5.2 NAME	BIRDMAN, LOUIS
STREET ADDRESS		5.3 STREET ADDRESS	307 SOUTH 21ST AVENUE
CITY-ST-ZIP		5.4 CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE		6.1 TITLE	VD
NAME		6.2 NAME	BIRDMAN, DIANE
STREET ADDRESS		6.3 STREET ADDRESS	307 SOUTH 21ST AVENUE
CITY-ST-ZIP		6.4 CITY-ST-ZIP	HOLLYWOOD, FL 33020

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. I am an attachment with an address.

SIGNATURE:

LOUIS BIRDMAN 1/24/94 954-977-6070

CR2E034 (10/97)