COR ANNL	PROFIT PORATION JAL REPORT 1996	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUI 1. Corporation	MENT # <b>S36387</b>	(6)			
FAIRW	'AY BOCA, INC.			I I <b>ra</b> ni <b>r</b> ha inn ishka riiha allan irikk	ARI ARRII BIOSI BIRIY AKRII AYRII RIRII IRRI
Principal Place	e of Business	Mailing Address			
4000 HOLLYWOOD BLVD. SUITE 770-N HOLLYWOOD FL 33021		4000 HOLLYWOOD BLVI MANAGEMENT OFFICE HOLLYWOOD FL 33021 US	D	Date Incorporated or Qualified     03/06/1991	3a, Date of Last Report 04/17/1995
— 777 C D11 D ⊢		2a. Mailing Address 26 1170 Pee1 S	treet	4, FEI Number	Applied For
Suite, Apt #, etc		Suite, Apt #, etc.		65-0254019  5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State	9	27 800 City & State	4	6. Election Campaign Financing	Fee Required  \$5.00 May Be
<sub>23</sub>   west 1 <sup>7</sup> 33401	Palm Beach, Florida Country	Montreal, Q	Country	Trust Fund Contribution  8. This corporation has liability for	Added to Fees
24 33401	25 U.S.A. 9. Name and Address of Current R	29 H3B 4P2	30 Canada	Florida Statules	Yes X No
<u>ر</u>	CORPORATION SYSTEM	egistered Agent	81 Name	10. Name and Address of New Re	gistered Agent
	200 S PINE ISLAND RD		82 Street A	ddress (P.O. Box Number is Not Acceptab	ole)
PL	ANTATION FL 33324		83		
			<b>84</b> City		<b>85</b> Zip Code
11. Pursuant t	to the provisions of Sections 607.0502 a	nd 607.1508, Florida Statute	s, the above named c	orporation submits this statement for the p	urnosa of changing its registered
office or re agent. I ar	egistered agent, or both, in the State of I m familiar with, and accept the obligation	Florida Such change was auns of, Section 607 0505, Flor	uthorized by the corpo rida Statutes.	ration's board of directors. Thereby accep	the appointment as registered
SIGNATURE	Signature, typied or printed name of registered agent ar	nd title 4 applicable (NOTE	Ficgistered Agent signature ri	ടൂഡ്രൂർ യീലവുള്ള stating)	314()
<b>12.</b> TITLE	OFFICERS AND D	DELETE DELETE	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
NAME	PD Ludick, arnold M.	C perese	1 1 TITLE 1 2 NAME	LUDWICK, ARNOLD M.	CERS AND DIRECTORS IN 12  (X) Change Addition (S)
STREET ADDRESS	1170 PEEL STREET		1 3 STREET ADDRESS		E03
CHTY - ST - ZIP	Montreal Qu EVD	DELETE	1.4 CiTY - ST - ZIP 2.1 TITLE		X Change Addition
NAME	PARSON, ANDREW J.		22 NAME	PARSONS, ANDREW J.	Change Change
STREET ADDRESS	1170 PEEL ST		2 3 STREET ADDRESS	•	
CITY-ST-ZIP TITLE	MONTREAL QU VD	DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		Change Addition
NAME	DOYLE, RICHARD P.	_	3.2 NAME		
STREET ADDRESS	1170 PEEL ST		3 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MONTREAL QU AS	DELETE	3.4 C(TY-ST-Z)P 4.1 T(TLE		Change Addition
NAME	ABRAMS, R. J		4. 2 NAME		
STREET ADDRESS	5 PLACE VILLE MARIE MONTREAL QU		4 3 STREET ADDRESS		
CITY - ST - ZIP TITLE	SVD	X DELETE	5 1 TITLE		Change Addition
NAME	LOU, GERALD E.		5 2 NAME		
STREET ADORESS	4000 HOLLYWOOD BLVD		5.3 STREET ADDRESS		
CITY-\$T-ZIP	HOLLYWOOD FL S	DELETE	5 4 CITY - ST - ZIP 6 1 TITLE		Change Addition
TITLE	COURTNELL, PAUL	Namenal	6 2 NAME		
		FRACE	6.3 STREET ADDRESS		
TITLE NAME STREET ADORESS	777 SOUTH FLAGLER DR., STI	: 500E			<u> </u>
NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereb	WEST PALM BEACH FL by certify that the information supplied w	th this filma is voluntarily fur	64 CHY-ST-ZIP	ualify for the exemption stated in Section 1	19.07(3)(k), Florida Statutes 1
NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereb further cer made und	WEST PALM BEACH FL by certify that the information supplied w tify that the information indicated on this er oath, that I am an officer of order or	ith this filing is voluntarily fur s annual report or supplement f the corporation or the rece	64 CITY - ST-ZIP nished and does not q ntal annual report is tru iver or trustee empowe	ualify for the exemption stated in Section it ie and accurate and that my signature sha ered to execute this report as regulated by C	19.07(3)(k), Florida Statutes, I If have Irin same legal effect as if Chapter 617, Florida Statutes; and
NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereb further cer made und	WEST PALM BEACH FL by certify that the information supplied w	ith this filing is voluntarily fur s annual report or supplement f the corporation or the rece	64 CITY - ST-ZIP nished and does not q ntal annual report is tru iver or trustee empowe	ualify for the exemption stated in Section 1 ie and accurate and that my signature sha red to execute this report as required by 0	19.07(3)(k), Florida Statutes. I Il have line same legal effect as if Chapter 617, Florida Statutes; and
NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereb further cer made und	WEST PALM BEACH FL by certify that the information supplied with that the information indicated on this er oath, that I am an officer of plecting one appears in Block/2 or Block 13/ft ch	ith this filing is voluntarily fur annual report or suppliement f the corporation or the rece arriged, or on an attachmoni	64 CITY - ST-ZIP nished and does not o ntal annual report is tru iver or trustee empower with an address  R.P. Doyle	ualify for the exemption stated in Section 1 to and accurate and that my signature shared to execute this report as required by C	If have the same legal effect as if Chapter 617, Florida Statutes; and