## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

	MENT # <b>S9957</b> 2	<b>2</b> (1)			
GOLDL	LINE PROPERTIES NEW YO	RK, INC.			
Pancipat Place	of Business	Mailing Address			ia iidi bibik dibik dibi) eldii bibil dibil dibi
1900 W COMMERCIAL BOULEVARD FORT LAUDERDALE FL 33309		1900 W COMMERCIAL BOULEVARD FORT LAUDERDALE FL 33309			
				3. Date Incorporated or Qualified 12/11/1991	3a. Date of Last Report 01/26/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0323671	Applied For Not Applicable
Scote, Apt. #, etc.		Suite. Apt. #, etc.			\$8.75 Additional
2		27		5. Certificate of Status Desired	Fee Required
Oty & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
210	Country	Zig:	Country	8. This corporation has liability fo	
4	25	29	30	Flooda Statutes Ye  10. Name and Address of New	S No
	9. Name and Address of Current	t Hegistered Agent	81 Name A		
AI			mando A. Tabernilla		
			82 58800	82 Stree Address P.O. Box Number is Not Acceptable) 8800 N.W. 36th Street	
	-L 33178		83		
			84 City Mia	•	FI 85 33178
		533,4500 51 11 60			!
or register	tri trie provisions of Sections 607.0502 redorior both, in the State of Floric	ta. Such change was authoriz	red by the corporation's bo	oration submits this statement for the plant of directors. I hereby accept the ap	pointment as registered agent. I am
familiar wit	ith and long the old gallons of, Secti	on 607.0506, Élorida Stat <b>n</b> es	mando A	Tahochilla	1/19/66
SIGNATURE .	Share, typed or printed name of pagestered upon to	and Ordrang to now the	The Bagistered Age Lagrature require	IONDETTING	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
Ir!,E	DP	<b>K</b> ) DELETE	1 1 TITLE	ODE ASSESSMENT TOO	Change Addition
NAME	PFENNIGER, RICHARD C.		1.2 NAME	SEE ATTACHED LIST	
STHEEL ADDRESS	8800 NW 36 ST		1.3 STREET ADDRESS		
OHY ST ZIP THLE	MIAMI FL.	DELÉTE	1.4 CHY-S1-ZH <sup>2</sup> 2.1 TILLE		Change Addition
NAME	TABERNILLA, ARMANDO A.	E DECENE	2 2 NAME		
STREET ADDRESS	8800 NW 36 ST.		2.3 STREET ADDRESS		
City - St - Ziri	MIAMI FL		2.4 CITY - \$1 - ZIP		
Mil	AS	<b>★</b> ] DELETE	3 1 TITLE		Change Addition
NAME.	RUBIN, DORA B.		3.2 NAME		
STREET ADDRESS	8800 NW 36 ST.		3.3 STREET ADDRESS		
Clissize	MIAMI FL		3.4 C+TY + ST - Z+P		
Trut	T	<b>X</b> DELETE	4 1 11TLE		Change Addition
MANG	ZINZI, ANDREW		4.2 NAME		
STREET ACORESS	8800 N.W. 36TH STREET		4.3 STREET ADDRESS		
City ST-281	MIAMI FL	DELETE	4.4 CHTY - ST - ZIP 5.1 TITLE	THE ALL ADDRESS OF THE PARTY.	Change Addition
TOTUE MAME		Kibereie	5 2 NAME		
STREET ALIONESS			53 STREET ADDRESS		
CHIY ST ZIF			5.4.C(1) y - \$1 - Z(P)		
COLUMN TO A STATE OF THE STATE		<b>X</b> ] DELETE	6 1 TITLE		Change Addition
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Ti'LE		<del>U</del> J With	6 2 NAME		
Trice NAME STREET ADDRESS		£j with			- Carago

rigo nereby cerriy mat the information supplied with this lining is voluntarily farmished and does not quality for the exemption stated in section 1.19.07 (sign, monde statutes). Trother certify that the information indicated on this annual report or suppliemental 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 for on an attachment with an address.

SIGNATURE:

SIGNITURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-590-2200

Daytime Phone #

CR2E034 (12/95)