

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthagt
 Secretary of State
 DIVISION OF CORPORATIONS

AMENDED PROFIT CORPORATION ANNUAL REPORT 1997

FILED

97 JUL 29 AM 11: 31

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # V14140

1. Corporation Name

MYSTIC POINTE REALTY CORP.

Principal Place of Business
**3565 Mystic Pointe Drive
 N. Miami Beach, FL 33180
 US**

Mailing Address
**888 Seventh Avenue
 Suite 3400
 New York, NY 10106**

3. Date Incorporated or Qualified **02/14/1992** 3a. Date of Last Report **05/01/1997**

2. Principal Place of Business
 21 **3565 Mystic Pointe Drive**

2a. Mailing Address
 26 **3565 Mystic Pointe Drive**

4. FEI Number **65-0343227** Applied For Not Applicable

Suite, Apt. #, etc. 22

Suite, Apt. #, etc. 27

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State **Aventura, FL**

City & State **Aventura, FL**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

Zip **33180** Country **USA**

Zip **33180** Country **USA**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**National Corporate Research, Ltd.
 1406 Hayes Street
 Tallahassee, FL 32301**

81 Name **Michael A. Mollod**
 82 Street Address (P.O. Box Number is Not Acceptable) **Mystic Pointe Realty Corp.**
 83 **3565 Mystic Pointe Drive**
 84 City ~~N. Miami Beach~~ **Aventura, FL** 85 Zip Code **33180**

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 *Michael A. Mollod* **Michael A. Mollod, President** DATE **5/1/97**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP** DELETE
 NAME **Mollod, Michael A.**
 STREET ADDRESS **888 Seventh Ave., Suite 3400**
 CITY-ST-ZIP **New York, NY 10106**

1.1 TITLE **DPT** Change Addition
 1.2 NAME **Mollod, Michael A.**
 1.3 STREET ADDRESS **Mystic Pointe Realty Corp.**
 1.4 CITY-ST-ZIP **3565 Mystic Pointe Drive, Aventura, FL 33180**

TITLE **DV** DELETE
 NAME **Grossi, Nicholas P**
 STREET ADDRESS **3565 Mystic Pointe Drive**
 CITY-ST-ZIP **N. Miami Beach, FL 33180**

2.1 TITLE **VS** Change Addition
 2.2 NAME **Whitney, Julie**
 2.3 STREET ADDRESS **Mystic Pointe Realty Corp.**
 2.4 CITY-ST-ZIP **3565 Mystic Pointe Drive, Aventura FL 33180**

TITLE **DV** DELETE
 NAME **Bory, Judith**
 STREET ADDRESS **888 Seventh Ave., Suite 3400**
 CITY-ST-ZIP **New York, NY 10106**

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE **S** DELETE
 NAME **Sindall, Faustina**
 STREET ADDRESS **3565 Mystic Pointe Drive**
 CITY-ST-ZIP **N. Miami Beach, FL 33180**

4.1 TITLE Change Addition
 4.2 NAME **500002252725--8**
 4.3 STREET ADDRESS **-07/30/97--01084--002**
 4.4 CITY-ST-ZIP *******35.00 *****35.00**

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME **500002252725--8**
 5.3 STREET ADDRESS **-07/30/97--01084--003**
 5.4 CITY-ST-ZIP *******26.25 *****26.25**

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

14. I do 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: *Michael A. Mollod* **Michael A. Mollod** DATE **5/1/97** PHONE **305-932-1350**

CR2E034 (9/96)