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

PROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V24137

(4)

OLYMPUS HOLDINGS, INC.

Principal Place of Business Mailing Address *XXXXXXXXXX XXXXXXXXXXXXX APPROVED AND

1997 FEB 1 1 PM 1: 19 SECRETARY OF STATE TALLAHASSEE. FLORIDA



MIAMI BEACH FL 33139			M	MIAMI BEACH FL 33139-6610							
							3.	Date Incorporated or Qualified 03/26/1992		e of Last R 2/1996	eport
2. Principal Place of Business 1 South Pointe Drive				2a, Mailing Address 2a 1 South Pointe Drive			4.	FEI Number		Ar	plied For
[21]				[20]				65-032 1326			ot Applicable
Suite, Apt #, etc				Suite, Apt. #, etc.			6.	Certificate of Status Desired		\$8.75 / Fee Re	
City & State				City & State				Election Campaign Financing			
23 Miami Beach			28	28 Miami Beach			"	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country			Zip	Cou			·······	pility for intangible tax under s. 199.032,		
24 33139	25 29 33139 30						Florida Statutes				
g. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
THR	EATT, ROB	ert r			61 Name						
4¥&	CONTRACY	CVENCIEXX	1	South Pointe	Dr.	62 Street	Address (I	P.O. Box Number is Not Accepta	hle)		
2213	EVK WORLD TO	WERX				•	Pointe Drive	ioio)			
MIAI	MI BEACH	FL 33139				83					
						20 20				T-1-1 #51	
						84 City M	iami 1	Beach	FL	85 Zip (33 4 39
11. Pursuant	to the provisi	ions of Sections 6	07.0502 and 6	07.1508, Florida Statut	les, the a	oove-named	corporation	on submits this statement for the	purpose of	changing it	s 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	Stgnature typed	or printed name of regis	tered agont and telo	if applicable (NO)	E Registere	d Agent signature	required whe	n reinstating)	DATE		
12.		OFFICE	RS AND DIRE	CTORS	13.			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTOR	IS IN 12
TITLE	PD			DELETE	1.1 (TLE	<u> </u>			Change	Addition
NAME	KRAMER,	THOMAS			1.2 N	AME					
STREET ADDRESS	446-00U	KINS XIVE X			1.3 S	REET ADDRESS	, ,	South Pointe Drive			
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TITLE	VPS			DELETE	2.1 1	TLE	1134	mi Beach FL 331	39	Change	Addition
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STREET ADDRESS						TREET ADDRESS		· ·		7	1 19/1/19/1
CITY - ST - 7IP						ITY-ST-ZIP		· .			$\langle \mathcal{U}^{NL} $

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 comparation or the receiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name information indicated on this I am an officer or director of t appears in Block 12 or Block

SIGNATURE:

SIGNATURE