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

**PROFIT** CORPORATION ANNUAL REPORT

1999

TITLE

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # V69213**

1. Corporation HOLLYW	OOD BEACH REALTY RESC	ORT ASSOC	IATES, INC						
Principal Place	e of Business	Mailing Ad	dress			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
923 HOLLYWOOD BLVD HOLLYWOOD FL 33019 HOLLYWOOD FL 33019							• •		
HOLLYWOOD F	L 33019	HOLLTWOO	D FL 33019			DO NOT WRITE IN THI	S SPACE		
						Date Incorporated or Qualifed     10/07/1992	-		i I
2. Principal P	lace of Business	2a. Mailing	Address			4. FEI Number	Ap	plied For	ı
21		26				65-0367353	No	t Applicable	ı
Suite, Apt.	#, etc.				~~~~	5. Certifcate of Status Desired	\$8.75 A		
22		27	_			5. Certificate of Status Desired	Fee Re	guired	
City & Stat	e —————————	City &	State			6. Election Campaign Financing	\$5.00		ı
23		28				Trust Fund Contribution	Added to	o Fees	
Zip	Country	Zip		ຸ Country ⊐າ	•	8. This corporation owes the current year I		□No	ı
24	25	29	30	0		Personal Property Tax.			
	9. Name and Address of Current	Registered A	gent	81	Name	10. Name and Address of New Registered	1 Agent		ĺ
	iesiotis, d g Hollywood blyd			82		ess (P.O. Box Number is Not Acceptable)			
	LYWOOD FL 33019			83					
		•		**					l
•				84	City	F	85 Zip C	Code	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida Such	change was auth	ionzad by	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the appearance of the purpose of the p	of changing its pointment as req	registered gistered	
	Signature, typed or printed name of registered agent				nt signature require			DO IN 40	9
12.	OFFICERS AND	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition	1
TITLE	PSTD		☐ DELETE	1.1 TITLE			C. Criange		
NAME	MANESIOTIS, D.G			1.2 NAME					5
STREET ADDRESS	923 HOLLYWOOD BLVD				TADORESS	•			L
CITY-ST-ZIP	HOLLYWOOD FL 33019		DELETE	1,4 CITY-S	T-ZIP		[] Change	Addition	6
TITLE	VPD		☐ DELETE	2.1 TITLE			Gridinge		ĺ
NAME	MANESIOTIS, LEWIS			2.2 NAME					1
STREET ADDRESS					TADDRESS				ļ
CITY; ST; ZIP ====	_HOLLYWOOD.FL 33019		□ DELETE	. 2. 4 CITY-5 3.1 TITLE	ST- ZIP		☐ Change	Addition	-
TITLE '	MANNERS, PETER G.		C bettie	3.2 NAME				_	ĺ
NAME	20 ATHAMBDA CEDCER	le q		1	TADDRESS				1
STREET ADDRESS	CORAL GABLES, FL 33			3.4. CITY-					
CITY-ST-ZIP	COLVAIL GADLES, IL 55.	714	☐ DELETE	4.1 TITLE	5 { - ZIP		☐ Change	Addition	
TITLE	1		Д Реген	4. 2 NAME			_ •	_	Ì
NAME STREET ADDRESS				1	T ADDRESS				
STREET ADDRESS	İ			4.4 CITY-S					
CITY-ST-ZIP TITLE			DELETE	5.1 TITLE	71 · 410		☐ Change	Addition	
NAME	]			5.2 NAME					
STREET ADDRESS				5.3 STREE	T ADDRESS				
CTTY-ST-ZIP				5.4 CITY-S	ST-ZIP				
TITLE			☐ DELETE	6.1 TITLE		-	Change	Addition	ĺ

CITY-ST-ZIP 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, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ DELETE

15 March 1999

954-920-5060

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90088 010 \*\*\*150.00