

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 336387

1. Corporation Name
PARK WEST DEVELOPERS INC

Principal Place of Business
P O BOX 2546 PALM VILLAGE STATION
5385 PALM AVENUE #1
HIALEAH FL 33012

Mailing Address
P O BOX 2546 PALM VILLAGE STATION
5385 PALM AVENUE #1
HIALEAH FL 33012

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90234 016 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/14/1968

4. FEI Number
59-1274324

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

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

8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

KURZWEIL, ALAN
8641 SW 84 TERR
MIAMI FL 33143

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
KURZWEIL, ALAN
STREET ADDRESS
8641 S.W. 84TH TERR.
CITY-ST-ZIP
MIAMI FL

TITLE ☐ DELETE

NAME
RICH, KING
STREET ADDRESS
900 BAY DRIVE #204
CITY-ST-ZIP
MIAMI BCH. FL

TITLE ☐ DELETE

NAME
KURZWEL, SHIRLEY
STREET ADDRESS
1800 NE 114TH ST. #2110
CITY-ST-ZIP
N. MIAMI FL

TITLE ☒ DELETE

NAME
KURZWEIL, MARTIN
STREET ADDRESS
1800 NE 114TH ST. #2110
CITY-ST-ZIP
N. MIAMI FL

TITLE ☐ DELETE

NAME
KURZWEIL, ALAN
STREET ADDRESS
8641 SW 84TH TERRACE
CITY-ST-ZIP
MIAMI FL 33143

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE:

Alan Kurzweil, Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-15-99

Date

305-822-9555

Daytime Phone #

CR2E034 (1/98)