

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 21, 1999 8:00 am  
Secretary of State

02-21-1999 90053 015 \*\*\*\*61.25

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|                                                          |                                                                                   |                                                                                                          |
|----------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| NONPROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1999</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Katherine Harris</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|----------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|

DOCUMENT # 724628

1. Corporation Name

CASTLE #11 CONDOMINIUM, INC.

Principal Place of Business

4750 N.W. 22ND COURT  
LAUDERHILL FL 33313

Mailing Address

4750 N.W. 22ND COURT  
LAUDERHILL FL 33313



|                                |                     |                                                         |
|--------------------------------|---------------------|---------------------------------------------------------|
| 2. Principal Place of Business | 2a. Mailing Address | 3. Date Incorporated or Qualified                       |
| 21                             | 26                  | 10/24/1972                                              |
| Suite, Apt. #, etc.            | Suite, Apt. #, etc. | 4. FEI Number                                           |
| 22                             | 27                  | 59-1499155                                              |
| City & State                   | City & State        | 5. Certificate of Status Desired                        |
| 23                             | 28                  | <input type="checkbox"/> \$8.75 Additional Fee Required |
| Zip                            | Zip                 | 6. Election Campaign Financing                          |
| 24                             | 29                  | <input type="checkbox"/> \$5.00 May Be Added to Fees    |
| Country                        | Country             | Trust Fund Contribution                                 |
| 25                             | 30                  |                                                         |

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

|                                                         |                                                       |                      |
|---------------------------------------------------------|-------------------------------------------------------|----------------------|
| SCHWARTZ, FRED<br>4750 NW 22 CT.<br>LAUDERHILL FL 33313 | 81 Name                                               | EDYTHE P. KAMPEL     |
|                                                         | 82 Street Address (P.O. Box Number is Not Acceptable) | 4750 N.W. 22 COURT   |
|                                                         | 83                                                    | LAUDERHILL           |
|                                                         | 84 City                                               | FL 85 Zip Code 33313 |

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE EDYTHE P. KAMPEL

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/9/99

| 12. OFFICERS AND DIRECTORS |                    | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                                        |
|----------------------------|--------------------|-------------------------------------------------------|----------------------------------------------------------------------------------------|
| TITLE                      | P                  | 1.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition                      |
| NAME                       | LEBOWITZ, HARRY    | 1.2 NAME                                              |                                                                                        |
| STREET ADDRESS             | 4750 NW 22ND CT    | 1.3 STREET ADDRESS                                    |                                                                                        |
| CITY-ST-ZIP                | LAUDERHILL FL      | 1.4 CITY-ST-ZIP                                       |                                                                                        |
| TITLE                      | VP                 | 2.1 TITLE                                             | TREASURER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | KAMPEL, EDYTHE     | 2.2 NAME                                              | EDYTHE P. KAMPEL                                                                       |
| STREET ADDRESS             | 4750 NW 22ND COURT | 2.3 STREET ADDRESS                                    | 4750 N.W. 22 COURT                                                                     |
| CITY-ST-ZIP                | LAUDERHILL FL      | 2.4 CITY-ST-ZIP                                       | LAUDERHILL, FL. 33313                                                                  |
| TITLE                      | D                  | 3.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition                      |
| NAME                       | GORDON, IRV        | 3.2 NAME                                              |                                                                                        |
| STREET ADDRESS             | 4750 NW 22ND CT.   | 3.3 STREET ADDRESS                                    |                                                                                        |
| CITY-ST-ZIP                | LAUDERHILL FL      | 3.4 CITY-ST-ZIP                                       |                                                                                        |
| TITLE                      | D                  | 4.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition                      |
| NAME                       | MOSES, SOL         | 4.2 NAME                                              |                                                                                        |
| STREET ADDRESS             | 4750 NW 22ND CT    | 4.3 STREET ADDRESS                                    |                                                                                        |
| CITY-ST-ZIP                | LAUDERHILL FL      | 4.4 CITY-ST-ZIP                                       |                                                                                        |
| TITLE                      | D                  | 5.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition                      |
| NAME                       | COLLINS, SHIRLEY   | 5.2 NAME                                              |                                                                                        |
| STREET ADDRESS             | 4750 NW 22ND CT    | 5.3 STREET ADDRESS                                    |                                                                                        |
| CITY-ST-ZIP                | LAUDERHILL FL      | 5.4 CITY-ST-ZIP                                       |                                                                                        |
| TITLE                      | TR                 | 6.1 TITLE                                             | V.P. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition      |
| NAME                       | SCHWARTZ, FRED     | 6.2 NAME                                              | SCHWARTZ, FRED                                                                         |
| STREET ADDRESS             | 4750 NW 22ND CT.   | 6.3 STREET ADDRESS                                    | 4750 N.W. 22 CT.                                                                       |
| CITY-ST-ZIP                | LAUDERHILL FL      | 6.4 CITY-ST-ZIP                                       | LAUDERHILL, FL. 33313                                                                  |

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 617, 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edythe P. Kampel 1/9/99 954-739-8935  
EDYTHE P. KAMPEL

CR2E037 (11/98)