

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 27 AM 7:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S76155 (8)

1. Corporation Name
WEITZER COUNTRY WALK HOMES, INC.

Principal Place of Business Mailing Address
4980 SW 72ND AVENUE **4980 SW 72ND AVENUE --**
SUITE 401 **SUITE 401 --**
MIAMI FL 33155 **MIAMI FL 33155**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
08/27/1991 **04/20/1994**

4. FEI Number Applied For
65-0298040 Not Applicable

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 has liability for intangible tax under § 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address

21. **5901 NW 151 Street** 26. **5901 NW 151 Street**
Suite, Apt. #, etc. Suite, Apt. #, etc.

22. **Suite 120** 27. **Suite 120**
City & State City & State

23. **Miami Lakes, Florida** 28. **Miami Lakes, Florida**
Zip Zip Country Country

24. **33014** 25. **USA** 29. **33014** 30. **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEITZER, HARRY
4980 SW 72ND AVENUE --
SUITE 401 --
MIAMI FL 33155 --

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
5901 NW 151 Street
83 **Suite 120**
84 City **Miami Lakes** 85 Zip Code **FL 33014**

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 (his) if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	WEITZER, HARRY
STREET ADDRESS	4980 SW 72ND AVENUE #401-
CITY - ST - ZIP	MIAMI FL --
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	5901 NW 151 Street, Suite 120
14 CITY - ST - ZIP	Miami Lakes, Florida 33014
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information included on this annual report or supplementary 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 in liquidation of the corporation; and that my name appears in Block 12 or Block 13 as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 as required by Chapter 607, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/95 305-819-4663

HARRY WEITZER