

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR -8 PM 2:28

DOCUMENT # 210949 (4)

1. Corporation Name
SURENE BUILDERS, INC.

Principal Place of Business
5385 PALM AVE.
P.O. BO 2548 PALM VILLAGE STATION
HALEAH FL 33012-7546

Mailing Address
5385 PALM AVE.
P.O. BOX 2546 PALM VILLAGE STATION
HALEAH FL 33012-7546

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 03/31/1958	3a. Date of Last Report 03/11/1994
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4. FBI Number	Applied For
59-0947994	Not Applicable

5. Certificate of Status Desired	☐	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
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21 23

Suite, Apt. #, etc. _____ Suite, Apt. #, etc. _____

22	27
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City & State _____ City & State _____

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	Suetelle Kurzweil		
82	Street Address (P.O. Box Number is Not Acceptable)	8641 SW 84 Terrace		
83				
84	City	Miami	FL	85 Zip Code 33143

11. Pursuant to the provisions of Sections 607.0502 and 607.1500, 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 607.0501, Florida Statutes.

SIGNATURE Suetelle Kurzweil Suetelle Kurzweil, Secretary DATE 03-01-95

CONFIDENTIAL - (When completed) Return to: Department of Defense, 4120 The Pentagon, Room 3E509, Arlington, VA 22204-6142

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	KURZWEIL,ALAN
STREET ADDRESS	8641 SW 84 TERR
CITY-ST-ZIP	MIAMI FL

TITLE	VD
NAME	RICH, KING
STREET ADDRESS	900 BAY DRIVE #204
CITY - ST - ZIP	MIAMI BEACH FL

TITLE	SD
NAME	KURZWEIL,SUETELLE
STREET ADDRESS	8641 SW 84 TERR
CITY-STATE-ZIP	MIAMI FL

NAME	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

NAME	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

NAME	
STREET ADDRESS	
CITY AND STATE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	☒ Change	☐ Addition
1.2 NAME	Jodi Lynn Kurzweil		
1.3 STREET ADDRESS	555 SE 34 Street, #2408		
1.4 CITY - ST - ZIP	Miami, FL 33137		

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	T/D	☐ Change	☒ Addition
4.2 NAME	Jodi Lynn Kurzweil		
4.3 STREET ADDRESS	555 NE 34 Street, #2408		
4.4 CITY - ST - ZIP	Miami, FL 33137		

51 FILE	A/S/D	☐ Change	☒ Addition
52 NAME	Esta K. Orovitz		
53 STREET ADDRESS	14020 SW 104th Place		
54 CITY-ST- ZIP	Miami, FL 33176		

61 TIME _____ ☐ Change ☐ Add
 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 119.07(3)(k), Florida Statutes. I further certify that the information indicated on the 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 resolver 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.

SIGNATURE: Suzette Kurzweil Suzette Kurzweil 03-01-95 305-822-9555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Editorial

Discussion