

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 253649 (8)

1. Corporation Name

HOWARD HEIGHTS, INC.

Principal Place of Business

Mailing Address

1121 VIA DEL MAR
WINTER PARK FL 32789

1121 VIA DEL MAR
WINTER PARK FL 32789



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 Zip Country

29 Zip Country

3. Date Incorporated or Qualified

12/02/1961

3a. Date of Last Report

01/20/1995

4. FEI Number

59-1005355

Applied For

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 s. 199.032,
Florida Statutes. ☐ Yes ☐ No

SCHWEBEL, MARTIN D
~~337 N. FERNCREEK AVE~~
ORLANDO FL 32803

81 Name

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

1516 E. COLONIAL DR. #100E

83

84

ORLANDO

FL

85 Zip Code
32803

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

MARTIN D. SCHWEBEL

(NOTE: Registered Agent signature required)

6-13-96

12. OFFICERS AND DIRECTORS

TITLE PD
NAME OSTROW, ALLEN A
STREET ADDRESS 1121 VIA DEL MAR
CITY-ST-ZIP WINTER PARK FL

☐ DELETE

TITLE S
NAME OSTROW, JOHN B
STREET ADDRESS 3860 BATTERSEA RD
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE TREASURER ☐ Change ☒ Addition

12 NAME JOAN OSTROW-SCHWEBEL

13 STREET ADDRESS 2335 HURON TRAIL

14 CITY-ST-ZIP MAITLAND, FL 32751

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ 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 119.07(3)(k), 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 in an attachment with an address.

SIGNATURE:

JOAN OSTROW SCHWEBEL

6/13/96

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Daytime Phone

(407) 47-3291

CR2E034 (3/96)