

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # K90801

(7)

1. Corporation Name

CUTLER RIDGE PROPERTIES, INC.



Principal Place of Business

% CHARLES C. HERMANOWSKI  
10705 SW 216 STREET, D-202  
MIAMI FL 33170

Mailing Address

10711 SW 216 ST.  
SUITE #100  
MIAMI FL 33170  
US

3. Date Incorporated or Qualified  
05/25/1989

3a. Date of Last Report  
03/21/1995

4. FEI Number  
65-0122391

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HERMANOWSKI CHARLES C  
10711 SW 216 ST  
SUITE #406  
MIAMI FL 33170

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 Transferring)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
SD  
HERMANOWSKI, JOAN A.  
STREET ADDRESS  
5845 COLLINS AVE. #406  
CITY - ST - ZIP  
MIAMI BEACH FL

TITLE ☐ DELETE

NAME  
PD  
HERMANOWSKI, CHARLES C.  
STREET ADDRESS  
5845 COLLINS AVE. 3408  
CITY - ST - ZIP  
MIAMI BEACH FL

TITLE ☐ DELETE

NAME  
TO  
HENSLEY, RICK  
STREET ADDRESS  
9533 SW 148 PL, CIR E  
CITY - ST - ZIP  
MIAMI FL

TITLE ☐ DELETE

NAME  
D  
KASSOVER, JEAN A.  
STREET ADDRESS  
4801 LAKEVIEW DR.  
CITY - ST - ZIP  
MIAMI BEACH FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Joan A. Hermanowski* JOAN A. HERMANOWSKI 3-7-96 305 868-9587

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

CR2E034 (12/95)