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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

SIGNATURE:

L42856

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G. L. HOMES OF RAINBOW LAKES II CORPORATION Principal Place of Business Mailing Address % ITZHAK EZRATTI % ITZHAK EZRATTI 1401 UNIVERSITY DRIVE, SUITE 200 1401 UNIVERSITY DRIVE. SUITE 200 CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071 3. Date Incorporated or Qualified 3a. Date of Last Report 01/17/1990 04/27/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0181511 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Ш 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s 199,032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MARK GRANT C/O RUDEN BARNETT 82 Street Address (P.O. Box Number is Not Acceptable) 200 E BROWARD BOULEVARD FT LAUDERDALE FL 33302 83 84 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, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS CR2E034 (12/95) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1, 1 TIFLE Change Addition NAME EZRATTI, ITZHAK 1.2 NAME 1401 UNIVERSITY DR. #200 STREET ADDRESS 1.3 STREET ADDRESS **CORAL SPRINGS FL** CITY-S1-ZIP 1.4 CITY - \$1 - ZIP TITLE VAS DELETE 2 1 TITLE ☐ Change Addition NAME FANT, ALAN J. 2.2 NAME STREET ADDRESS 1401 UNIVERSITY DR. #200 2 3 STREET ADDRESS CITY - ST - ZIP CORAL SPRINGS FL 24 CITY-ST-ZIP TATLE DELETE 3 1 TILLE Change Addition NAME COSTELLO, RICHARD A. 3.2 NAME STREET ADDRESS 1401 UNIVERSITY DR. #200 3.3 STREET ADDRESS **CORAL SPRINGS FL** CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4 1 TITLE Change Addition MOSHE, EZRATTI 4.2 NAME 1401 UNIVERSITY DR. #200 STREET ADDRESS 4.3 STREET ADDRESS CORAL SPRINGS FL CITY-ST-ZIP 4.4 CITY-ST-ZIP THILE DELETE 5.1 TITLE Change Addition NAME NORWALK, RICHARD 5.2 NAME 1401 UNIVERSITY DRIVE #200 STREET ADDRESS 5.3 STREET ADDRESS **CORAL SPRINGS FL** CITY-ST-ZIP 5.4 CITY - \$1 - 2IP TITLE [] DELETE 6. 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily turnished 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 reporter or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name