

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L48725 (0)

1. Corporation Name
WEITZER CHAPEL TRAIL HOMES, INC.



Principal Place of Business 5901 NW 151 STREET SUITE 120 MIAMI LAKES FL 33014 US	Mailing Address 5901 NW 151 STREET SUITE 120 MIAMI LAKES FL 33014-2428 US
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 02/09/1990	3a. Date of Last Report 03/29/1996
21. Suite, Apt. #, etc.	26. P.O. Box 4550	4. FEI Number 65-0176482	Applied For Not Applicable
22. City & State	27. Miami Lakes, FL	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
24. Zip 33014	29. Country USA	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
25. Country	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
WEITZER, HARRY 5901 NW 151 STREET, SUITE 120 MIAMI LAKES FL 33014		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 _____ DATE _____
Signature, typed or printed name of registered agent and talk, if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	D WEITZER, HARRY
STREET ADDRESS	5901 NW 151 STREET, SUITE 120
CITY-ST-ZIP	MIAMI LAKES FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11. TITLE	V.P., Treasurer, Asst. Secy. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. NAME	Peter Kleinerman
13. STREET ADDRESS	5901 NW 151 Street, Suite 120
14. CITY-ST-ZIP	Miami Lakes, FL 33014
21. TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22. NAME	James P. Rosewater
23. STREET ADDRESS	5901 NW 151 Street, Suite 120
24. CITY-ST-ZIP	Miami Lakes, FL 33014
31. TITLE	Vice President, Secy. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32. NAME	Harry Speizer
33. STREET ADDRESS	5901 NW 151 Street, Suite 120
34. CITY-ST-ZIP	Miami Lakes, FL 33014
41. TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42. NAME	Leigh Feldstein
43. STREET ADDRESS	5901 NW 151 Street, Suite 120
44. CITY-ST-ZIP	Miami Lakes, FL 33014
51. TITLE	Corporate Controller <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52. NAME	Timothy S. Hart
53. STREET ADDRESS	5901 NW 151 Street, Suite 120
54. CITY-ST-ZIP	Miami Lakes, FL 33014
61. TITLE	President, Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME	Harry Weitzer
63. STREET ADDRESS	5901 NW 151 Street, Suite 120
64. CITY-ST-ZIP	Miami Lakes, FL 33014

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 the address.

SIGNATURE:  **HARRY WEITZER, DIRECTOR** 4/24/97 205 810 4662

CR2E034 (9/96)