

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # L51009 (3)
1. Corporation Name
WEITZER HOUSING CORPORATION



Principal Place of Business
**% HARRY WEITZER
5901 NW 151 STREET, STE 120
MIAMI LAKES FL 33014
US**

Mailing Address
**% HARRY WEITZER
5901 NW 151 STREET, STE 120
MIAMI LAKES FL 33014
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30
9. Name and Address of Current Registered Agent

**WEITZER, HARRY
5901 NW 151 STREET
SUITE 120
MIAMI LAKES FL 33014**

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
02/19/1990

3a. Date of Last Report
04/25/1995

4. FET Number
65-0176481

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. 190.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

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 607.1503, 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 607.0504, Florida Statutes.

SIGNATURE

Signature of the person authorized to sign this report on behalf of the corporation

Printed Name of the person authorized to sign this report on behalf of the corporation

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**D
WEITZER, HARRY
5901 NW 151 STREET, STE 120
MIAMI LAKES FL**

☐ DELETE

2. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

3. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

4. TITLE
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CITY-STATE-ZIP

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5. TITLE
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CITY-STATE-ZIP

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6. TITLE
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CITY-STATE-ZIP

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7. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

2. TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

3. TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

4. TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

5. TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

6. TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

7. TITLE

72 NAME

73 STREET ADDRESS

74 CITY-STATE-ZIP

8. TITLE

82 NAME

83 STREET ADDRESS

84 CITY-STATE-ZIP

☐ Change ☐ Addition

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3/22/96

(305) 819-4663

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