

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # **L91663**

(9)

1. Corporation Name

THE ISLES AT SILVER LAKES, INC.

95 MAY -1 AM 8:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

% PETER M. HODKIN
2200 W. COMMERCIAL BLVD., STE. 302
FT. LAUDERDALE FL 33309

% PETER M. HODKIN
2200 W. COMMERCIAL BLVD., STE. 302
FT. LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/31/1990

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0214517

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

HODKIN, PETER M.
2200 W. COMMERCIAL BLVD.
SUITE 302
FT. LAUDERDALE FL 33309

01 Name

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

03

04 City

FL

05 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 (type or printed name of registered agent and title if applicable)

(P.O. Box Number is Not Acceptable)

TW

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

ZUCKERMAN, DAVID

STREET ADDRESS

1201 S.W. 102ND AVE.

CITY, ST, ZIP

PEMBROKE PINES FL

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

D

NAME

ZUCKERMAN, ANDREW

STREET ADDRESS

1201 S.W. 102ND AVE.

CITY, ST, ZIP

PEMBROKE PINES FL

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

D

NAME

LEVY, MICHAEL

STREET ADDRESS

16855 NE 2ND AVE., #101

CITY, ST, ZIP

N. MIAMI BEACH FL

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

D

NAME

FELS, JONATHAN

STREET ADDRESS

16855 NE 2ND AVE., #101

CITY, ST, ZIP

N. MIAMI BEACH FL

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

D

NAME

STREET ADDRESS

CITY, ST, ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

D

NAME

STREET ADDRESS

CITY, ST, ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information appearing on this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this filing 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, 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 of this report as an attachment with an address.

SIGNATURE:

Michael Levy

(305) 437-8144

ORIGINAL AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Exhibit Number