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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M14206** (0)

1. Corporation Name

WEISER AND LEFTON PROPERTIES, INC.



Principal Place of Business

**C/O SHERWOOD M. WEISER
3250 MARY ST., 5TH FLOOR
MIAMI FL 33133-5232
US**

Mailing Address

**C/O SHERWOOD M. WEISER
3250 MARY ST., 5TH FLOOR
MIAMI FL 33133-5232
US**

3. Date Incorporated or Qualified

04/18/1985

3a. Date of Last Report

05/01/1995

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

**WEISER, SHERWOOD M.
3250 MARY ST.
5TH FLOOR
MIAMI FL 33133**

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 (block) of registered agent or director

Signature typed or printed (block) of registered agent or director

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ DELETE
	DC			
	WEISER, SHERWOOD M.	3250 MARY STREET, S-500	MIAMI FL	
	DAS			
	WEISER, JUDITH	3250 MARY STREET, S-500	MIAMI FL	
	DPAS			
	LEFTON, DONALD E.	3250 MARY STREET, S-500	MIAMI FL	
	DAT			
	FISHER, ROBYN C.	3250 MARY STREET, S-500	MIAMI FL	
	VAS			
	SIBLEY, PETER L.	3250 MARY STREET, S-500	MIAMI FL	
	STV			
	TEMLING, W. PETER	3250 MARY STREET, S-500	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-STATE-ZIP	☐ Change ☐ Add on
1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-STATE-ZIP	
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-STATE-ZIP	
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-STATE-ZIP	
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-STATE-ZIP	
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-STATE-ZIP	
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-STATE-ZIP	

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

W. PETER TEMLING, SEC.

4/30/96

(305) 445-2493

5-1-96

CR2E034 (12/95)