

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

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***95 APR 25 AM 10:17**

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT 1995	 3-4394	FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M17239 (8)
1. Corporation Name WEITZER COMMUNITIES CORPORATION

Principal Place of Business % HARRY WEITZER 4960 SW 72 AVE #401 MIAMI FL 33155-2541	Mailing Address % HARRY WEITZER 4960 SW 72 AVE #401 MIAMI FL 33155-2541
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DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/25/1985	3a. Date of Last Report 04/20/1994
21 5901 NW 151 Street	28 5901 NW 151 Street	4. FEI Number 59-2652782		☐ Applied For ☐ Not Applicable	
22 Suite 120	27 Suite 120	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Miami Lakes, FL	28 Miami Lakes, FL	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 33014	25 USA	29 33014	30 USA	8. This corporation has liability for intangible tax under S. 199 n32 Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
WEITZER, HARRY 4960 SW 72 AVE #401-- MIAMI FL 33155--				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)	5901 NW 151 Street		
				83	Suite 120		
				84 City	FL	85 Zip Code	33014

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 title if applicable. (NOTE: Registered Agent signature required when reconstituting.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DP	NAME WEITZER, HARRY	1.1 TITLE	☒ Change ☐ Addition
STREET ADDRESS 4960 SW 72 AVE #401-	CITY - ST - ZIP MIAMI FL	1.2 NAME	
		1.3 STREET ADDRESS 5901 NW 151 Street, Ste 120	
		1.4 CITY - ST - ZIP Miami Lakes, FL 33014	
TITLE	NAME	2.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	CITY - ST - ZIP	2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY - ST - ZIP	
TITLE	NAME	3.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	CITY - ST - ZIP	3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY - ST - ZIP	
TITLE	NAME	4.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	CITY - ST - ZIP	4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY - ST - ZIP	
TITLE	NAME	5.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	CITY - ST - ZIP	5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY - ST - ZIP	
TITLE	NAME	6.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	CITY - ST - ZIP	6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY - ST - ZIP	

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 110.07(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 907, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ **4/17/95 (305) 819-4663**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Harry Weitzer