

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Murphree
Secretary of State
Division of Corporations

APPROVED
AND
FILED

MAY 11 1996

MIAMI, FLORIDA

DOCUMENT # M32096

(3)

By Certificate of Incorporation

EXCELL LTD., INC

Where Report is Prepared

**9301 SW 69 COURT
MIAMI FL 33156**

Where Report is Filed

**9301 SW 69 COURT
MIAMI FL 33156**

(Do Not Write in This Space)

3. Date Registered (2/2/96)	3a. Date of Last Report
05/15/1986	05/01/1994
4. FEI Number	Applied For
59-2691529	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 § 199.032, Florida Statutes.	
☒ Yes ☐ No	

2. Principal Office of Corporation	2a. Mailing Address
21. ☐	26. ☐
22. State of Florida	27. State of Florida
23. City of Miami	28. City of Miami
24. ☐	29. ☐
25. ☐	30. ☐

9. Name and Address of Current Registered Agent

**BEA, JAI WOO
9301 S.W. 69 COURT
MIAMI FL 33156**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. ☐	
84. City	FL

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 of Registered Agent or President of the Corporation)

(Signature of Registered Agent or President of the Corporation)

At

in

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
101. NAME	TD ECHVERRI, JUAN M.	11. NAME	☐ Change ☐ Addition
102. STREET ADDRESS	9301 S.W. 69TH CT.	12. NAME	
103. CITY, ST, ZIP	MIAMI FL	13. STREET ADDRESS	
104. NAME	PS BAE, JAI WOO	14. CITY, ST, ZIP	☐ Change ☐ Addition
105. STREET ADDRESS	9301 S.W. 69TH CT.	15. NAME	
106. CITY, ST, ZIP	MIAMI FL	16. STREET ADDRESS	
107. NAME		17. CITY, ST, ZIP	☐ Change ☐ Addition
108. STREET ADDRESS		18. NAME	
109. CITY, ST, ZIP		19. STREET ADDRESS	
110. NAME		20. CITY, ST, ZIP	☐ Change ☐ Addition
111. STREET ADDRESS		21. NAME	
112. CITY, ST, ZIP		22. STREET ADDRESS	
113. NAME		23. CITY, ST, ZIP	☐ Change ☐ Addition
114. STREET ADDRESS		24. NAME	
115. CITY, ST, ZIP		25. STREET ADDRESS	
116. NAME		26. CITY, ST, ZIP	☐ Change ☐ Addition
117. STREET ADDRESS		27. NAME	
118. CITY, ST, ZIP		28. STREET ADDRESS	
119. NAME		29. CITY, ST, ZIP	☐ Change ☐ Addition
120. STREET ADDRESS		30. NAME	
121. CITY, ST, ZIP		31. STREET ADDRESS	
122. NAME		32. CITY, ST, ZIP	☐ Change ☐ Addition
123. STREET ADDRESS		33. NAME	
124. CITY, ST, ZIP		34. STREET ADDRESS	
125. NAME		35. CITY, ST, ZIP	☐ Change ☐ Addition
126. STREET ADDRESS		36. NAME	
127. CITY, ST, ZIP		37. STREET ADDRESS	
128. NAME		38. CITY, ST, ZIP	☐ Change ☐ Addition
129. STREET ADDRESS		39. NAME	
130. CITY, ST, ZIP		40. STREET ADDRESS	
131. NAME		41. CITY, ST, ZIP	☐ Change ☐ Addition
132. STREET ADDRESS		42. NAME	
133. CITY, ST, ZIP		43. STREET ADDRESS	
134. NAME		44. CITY, ST, ZIP	☐ Change ☐ Addition
135. STREET ADDRESS		45. NAME	
136. CITY, ST, ZIP		46. STREET ADDRESS	
137. NAME		47. CITY, ST, ZIP	☐ Change ☐ Addition
138. STREET ADDRESS		48. NAME	
139. CITY, ST, ZIP		49. STREET ADDRESS	
140. NAME		50. CITY, ST, ZIP	☐ Change ☐ Addition
141. STREET ADDRESS		51. NAME	
142. CITY, ST, ZIP		52. STREET ADDRESS	
143. NAME		53. CITY, ST, ZIP	☐ Change ☐ Addition
144. STREET ADDRESS		54. NAME	
145. CITY, ST, ZIP		55. STREET ADDRESS	
146. NAME		56. CITY, ST, ZIP	☐ Change ☐ Addition
147. STREET ADDRESS		57. NAME	
148. CITY, ST, ZIP		58. STREET ADDRESS	
149. NAME		59. CITY, ST, ZIP	☐ Change ☐ Addition
150. STREET ADDRESS		60. NAME	
151. CITY, ST, ZIP		61. STREET ADDRESS	
152. NAME		62. CITY, ST, ZIP	☐ Change ☐ Addition
153. STREET ADDRESS		63. NAME	
154. CITY, ST, ZIP		64. STREET ADDRESS	
155. NAME		65. CITY, ST, ZIP	☐ Change ☐ Addition
156. STREET ADDRESS		66. NAME	
157. CITY, ST, ZIP		67. STREET ADDRESS	
158. NAME		68. CITY, ST, ZIP	☐ Change ☐ Addition
159. STREET ADDRESS		69. NAME	
160. CITY, ST, ZIP		70. STREET ADDRESS	
161. NAME		71. CITY, ST, ZIP	☐ Change ☐ Addition
162. STREET ADDRESS		72. NAME	
163. CITY, ST, ZIP		73. STREET ADDRESS	
164. NAME		74. CITY, ST, ZIP	☐ Change ☐ Addition
165. STREET ADDRESS		75. NAME	
166. CITY, ST, ZIP		76. STREET ADDRESS	
167. NAME		77. CITY, ST, ZIP	☐ Change ☐ Addition
168. STREET ADDRESS		78. NAME	
169. CITY, ST, ZIP		79. STREET ADDRESS	
170. NAME		80. CITY, ST, ZIP	☐ Change ☐ Addition
171. STREET ADDRESS		81. NAME	
172. CITY, ST, ZIP		82. STREET ADDRESS	
173. NAME		83. CITY, ST, ZIP	☐ Change ☐ Addition
174. STREET ADDRESS		84. NAME	
175. CITY, ST, ZIP		85. STREET ADDRESS	
176. NAME		86. CITY, ST, ZIP	☐ Change ☐ Addition
177. STREET ADDRESS		87. NAME	
178. CITY, ST, ZIP		88. STREET ADDRESS	
179. NAME		89. CITY, ST, ZIP	☐ Change ☐ Addition
180. STREET ADDRESS		90. NAME	
181. CITY, ST, ZIP		91. STREET ADDRESS	
182. NAME		92. CITY, ST, ZIP	☐ Change ☐ Addition
183. STREET ADDRESS		93. NAME	
184. CITY, ST, ZIP		94. STREET ADDRESS	
185. NAME		95. CITY, ST, ZIP	☐ Change ☐ Addition
186. STREET ADDRESS		96. NAME	
187. CITY, ST, ZIP		97. STREET ADDRESS	
188. NAME		98. CITY, ST, ZIP	☐ Change ☐ Addition
189. STREET ADDRESS		99. NAME	
190. CITY, ST, ZIP		100. STREET ADDRESS	

SIGNATURE:

(Signature and Type on Printed Name of Signing Officer or Director)

3/13/95

Exhibit Form 4

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **M33485** (7)

1. Corporation Name

DRAKE HOMES, INC.

Principal Place of Business

Mailing Address

**822 SUNSET DR S
LAKE WORTH FL 33461**

**822 SUNSET DR S
LAKE WORTH FL 33461**

95 MAY 1 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		06/11/1986	03/28/1994
22 State Apt # etc		27 State Apt # etc		4. FEI Number	Applied For
23 City & State		28 City & State		59-2689091	Not Applicable
24		25		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
29		30		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24		25		8. This corporation has liability for intangible tax under S. 190 (32) Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DRAKE, CHARLES D
822 SUNSET DR S
LAKE WORTH FL 33461**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.05(3) and 607.14(8) 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 responsibility as prescribed by Sections 607.05(3) and 607.14(8) Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	PTD	1. TITLE	☐ Change ☐ Addition
2. NAME	DRAKE, CHARLES D.	2. NAME	
3. STREET ADDRESS	822 SUNSET DR S	3. STREET ADDRESS	
4. CITY & STATE	LAKE WORTH FL	4. CITY & STATE	
5. TITLE	VPDS	5. TITLE	☐ Change ☐ Addition
6. NAME	DRAKE, CAROL K.	6. NAME	
7. STREET ADDRESS	822 SUNSET DR S	7. STREET ADDRESS	
8. CITY & STATE	LAKE WORTH FL	8. CITY & STATE	
9. TITLE	VPDS	9. TITLE	☐ Change ☐ Addition
10. NAME	MELEAR, LAURA D	10. NAME	
11. STREET ADDRESS	822 SUNSET DR S	11. STREET ADDRESS	
12. CITY & STATE	LAKE WORTH FL	12. CITY & STATE	
13. TITLE		13. TITLE	☐ Change ☐ Addition
14. NAME		14. NAME	
15. STREET ADDRESS		15. STREET ADDRESS	
16. CITY & STATE		16. CITY & STATE	
17. TITLE		17. TITLE	☐ Change ☐ Addition
18. NAME		18. NAME	
19. STREET ADDRESS		19. STREET ADDRESS	
20. CITY & STATE		20. CITY & STATE	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(2)(b), Florida Statutes. I further certify that the information included in 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 of changed or original attachment with an address.

SIGNATURE:

CHARLES D. DRAKE
Charles D. Drake, Pres.

4-13-95

1-407-582-8431