

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 22, 2008 8:00 am
Secretary of State

07-22-2008 90006 022 ***150.00

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1. Entity Name

TWERASER REALTY INC.



Principal Place of Business

800 EAST CYPRESS CREEK ROAD
SUITE 300
FT. LAUDERDALE FL 33334

Mailing Address

800 EAST CYPRESS CREEK ROAD
SUITE 300
FT. LAUDERDALE FL 33334

60045279



2. Principal Place of Business - No P.O. Box #

9784 NW 66th PL

3. Mailing Address

9784 NW 66th PL

State, Apt. #, etc.

State, Apt. #, etc.

1st MOORE

CR2E034 (10/07)

City & State
PARKLAND FL

City & State
PARKLAND FL

4. FE# Number 65-1053800

Applied For
Not Applicable

Zip
33076

Country

Zip
33076

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TWEASER ENTERPRISES INC.
800 E CYPRESS CREEK RD #300
FORT LAUDERDALE FL 33326

7. Name and Address of New Registered Agent

Name TWERASER ENTERPRISES INC.

Street Address (P.O. Box Number is not Acceptable)

9784 NW 66th PL

City PARKLAND

FL

Zip Code 33076

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and state of application

(NOTE: Registered Agent signature required when submitting)

DATE

7/16/8

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VP ☒ Delete
NAME MINEO, RICHARD
STREET ADDRESS 3610 LLOYD DR
CITY-ST-ZIP FORT LAUDERDALE FL 33309

TITLE P ☐ Delete
NAME ANTIVLLER, URSULA
STREET ADDRESS 800 E. CYPRESS CREEK RD
CITY-ST-ZIP FORT LAUDERDALE FL 33334

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP ☒ Change ☐ Addition
NAME ELLEN DULIKRAVICH
STREET ADDRESS 1249 SW 15th AVE
CITY-ST-ZIP PEBROKE PINES FL 33021

TITLE ☒ Change ☐ Addition
NAME AMULER URSULA
STREET ADDRESS KANT STR 2211
CITY-ST-ZIP BERLIN GERMANY

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all officers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/16/8

07-775040

Caro

Daytime Phone #