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

**CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P9300003830 (5) **DOCUMENT #** 

ENGLE HOMES/BROWARD, INC.

APPROVED AND FILED

96 APR 24 AM 10:53

SECRETARY OF STATE TALLAHASSEE, FLORIDA



	•							
Principal Place of Business Mailing Address					F JORISTON IIM DBIAN IIIII MAIII MAIII MAIII		88 (1121 19196	11(1) ##11 ##11
123 NORTHWEST 13TH STREET 123 NORTHWEST 13TH STREET SUITE 300 SUITE 300								
BOCA RATON FL 33432 BOCA RATON FL 33432					3. Date incorporated or Qualified 3a. Date of Last Repor 01/19/1993 04/26/1995			
2. Principal Pla	ce of Business	2a. Mailing Address	ing Address		4. FEI Number Applied For			``
21		26	<del> </del>		65-0389397			Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>X</b> )	Fee I	Additional Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		Added	O May Be d to Fees
Zip	Country	Zip	Country		8. This corporation has liability for		ax under s	199.032,
24	25	29	30		Florida Statutes Yes  10 Name and Address of New F	No.	Agent	
	9. Name and Address of Currer	it Registered Agent	81	Name	10. Name and Address of New F	egistered	Main	
Shapiro, David 123 N.W. 13th Street			82	Street Addr	dress (P.O. Box Number is Not Acceptable)			
STE. 300			83					
	TON FL 33432		84		ration submits this statement for the pu	FL	<b>.</b>	p Code
familiar wit	n, and accept the obligations of, Sect	1100 607.0505, Florida Statutes.			and of directors. I hereby accept the app	DATE		
12.	OFFICERS AN	AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		RS IN 12	
THILF	VD DELETE		1 1 TITLE	ì			☐ Change	☐ Addition
NAME	ENGELSTEIN, ALEC	F 000	1.2 NAME					
SIREFT ADDRESS	123 NW 13TH STREET, SUIT	E 300		ADDRESS				
CITY-S1-ZIP			2. 1 TITLE	51-212			Change	Addition
TITLE			2.2 NAME					
NAME STREET ADDRESS	123 NW 13TH STREET, SUITE 300			I ADDRESS	<b>400001791934</b> -04/24/9601012022_			
CHTY - ST - ZIP			2 4 CITY -	ST-ZIP	****208.75 *****208.75			
TITLE	DV	☐ DELETE	3 1 TITLE				Change	Addition
NAME	KRAYNICK, JOHN A		3.2 NAME					
STREET ADDRESS	123 NW 13TH STREET, SUIT	E 300	3.3. STREE	T ADDRESS				
CHY-ST-ZiP	BOCA RATON FL 33432		3 4 CITY -				Change	Addition
TITLE	VSTD	DELÉTÉ	4. 1 TITLE	ŀ			[_] Change	[ Addition
NAME	SHAPIRO, DAVID		4 2 NAME					
STREET ADDRESS	123 NW 13TH STREET			T ADDRESS				
CITY-ST-ZIP			4.4 CHY-		Change Addition			Addition
TITLE			5 2 NAME					
NAME SUBSEX ADDRESSS				T ADDRESS				
STREET ADDRESS			5.4 CITY-					
CITY-ST ZIP		☐ D£LETE	6 1 TITLE				Change	☐ Addition
NAME		••••	6.2 NAME					
STREET ADDRESS			6 3 STREE	T ADDRESS				
CITY-ST-ZIP			6.4 CHY-	S1 - 71º			<u></u> .	
dd Lela harak	andity that the information supplier	with this filing is voluntarily furn	ished and do	es not qualify	for the exemption stated in Section 11	9.07(3)(k), F	Iorida Statu	ites. I further

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)(R). Florida Statutes, I number certify that the information indicated on this annual period in 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 £07, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or un an affectiment with an address.

SIGNATURE:

APRIL 11, 1996 (407) 391-4012