PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300046533 1. Corporation Name

LENNAR PARTNERS, INC.

Principal Place	of Business	Mailing Address				•••••	
760 NW 107TH A MIAMI FL 33172	AVE .	760 NW 107TH AVE MIAMI FL 33172 US		DO NOT WRITE	IN THIS SPA	ACE	
US				3. Date Incorporated or Qualifed			
					07/01/1993		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0421632		Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.			5. Certifcate of Status Desired		8.75 Additional Fee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country 25	Zip 29 30	Countr	у	This corporation owes the current Personal Property Tax.		ible Yes □No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
1	N, SHELLY		8:		dress (P.O. Box Number is Not Acceptab	le)	
760 NW 107TH AVE			 	SU	1 te 300		
MIAM	I FL 33172		8	3			
	,		8-	1 1		FL.	35 Zip Code
office or re agent. I an	o the provisions of Sections 607.0502 gistered agent, or both, in the State o n familiar with, and accept the obligation	i Florida. Such change was auth	iorizea b	y tne corpora	rporation submits this statement for the p tion's board of directors. I hereby accept	urpose of cha the appointm	inging its registered ent as registered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Ag	ent signature requ	ired when reinstating)	DATE	
12. OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFF		
πte	AS	∑ DELETE	1.1 TITLE		A5		Change

TORS IN 12 Addition MCMICKLE, J. T. 1.2 NAME 760 NW 107TH AVE 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33172** 1.4 CITY-ST-ZIP CITY+ST-ZIP **⊡**•Addition ☐ DELETE TITL F 2.1 TITLE RUBIN, SHELLY 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 760 NW 107TH AVE **MIAMI FL 33172** 2.4 CITY-ST-ZIP CITY-ST-ZIP F. Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME MILLER, LEONARD 700-NW107 AVE 3.3 STREET ADDRESS 760 NW 107TH AVE STREET ADDRESS 3.4. CITY-ST-ZIP **MIAMI FL 33172** CITY-ST-ZIP Change ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME JORDAN, MARGARET 4.3 STREET ADDRESS STREET ADDRESS 760 NW 107TH AVE MIAM! FL 33172 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change 5.1 TITLE TITLE CEO 5.2 NAME NAME SAIONTZ, STEVEN J. 5.3 STREET ADDRESS 760 NW 107TH AVE STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP MIAMI_FL 33172 Addition Change ☐ DELETE 6.1 TITLE TITLE 6.2 NAME NAME MILLER, STUART A 6.3 STREET ADDRESS 700 N.W. 107TH AVE. STREET ADDRESS 6.4 CITY-ST-ZIP MIAMI FL CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

MATINE EMARGARETRIORDAN, TREAS.

FILED

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90246 048 ***150.00

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