

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

CORPORATION
- ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000006442 (5)

1. Corporation Name

EQUITY ONE (COMMONWEALTH) INC.

Principal Place of Business

Mailing Address

480 LINCOLN RD.
SUITE 340
MIAMI BEACH FL 33139

430 LINCOLN RD.
SUITE 640
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

01/26/1994

4. FBI Number

Applied For

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

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

Yes ☐ No ☒

2. Principal Place of Business

2a. Mailing Address

21 777 17TH STREET

26 777 17TH STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 PENTHOUSE

27 PENTHOUSE

City & State

City & State

23 MIAMI BEACH FL

28 MIAMI BEACH FL

Zip

Country

Zip

Country

24 33139

25 USA

29 33139

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

81 Name

Chaim Katzman

82 Street Address (P.O. Box Number is Not Acceptable)

777 17TH STREET

83

PENTHOUSE

84 City

MIAMI BEACH

FL

85 Zip Code

33139

11. Pursuant to the provisions of Sections 607.0302 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 person named as registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PS
NAME KATZMAN, CHAIM
STREET ADDRESS 480 LINCOLN RD., SUITE 340
CITY - ST - ZIP MIAMI BEACH FL 33139

11 TITLE

☒ Change ☐ Addition

12 NAME

13 STREET ADDRESS

777 17th Street, Penthouse
Miami Beach, FL 33139

14 CITY - ST - ZIP

21 TITLE

☐ Change ☒ Addition

22 NAME

23 STREET ADDRESS

V
DORON VALERO
777 17TH STREET, PENTHOUSE
MIAMI BEACH, FL

24 CITY - ST - ZIP

31 TITLE

☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

REMITTED BY MAY 1

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

4-21-95

305 672 1234

Date

Telephone Number